

U.S. Department
of TransportationNational Highway
Traffic Safety
Administration
DOT Auto Safety Hotline
Vehicle Owner's Questionnaire (VOQ)
NATIONWIDE 1-888-DASH-2-DOT
1-888-327-4236
www.nhtsa.dot.gov/hotline
FOR AGENCY USE ONLY 258

Data Received

06-NOV-2000

 Od_or _____
 rt_dt _____
 od_rt _____
 up_ltr _____

Reference No.

735872

 Do you authorize NHTSA to provide a copy of report to the manufacturer of your vehicle? YES NO
 In the absence of an authorization, NHTSA WILL NOT provide your name and address to the vehicle manufacturer.

Signature of Owner _____ Date ____/____/____

VEHICLE INFORMATION

Vehicle Ident. No. (VIN) <small>(Listed at front of windshield or driver's side)</small>	Vehicle Make	Vehicle Model	Vehicle Year	Current Odometer Reading
2FALP74W4TX180501	FORD	CROWN VICTORI	1996	

Purchase Date 01-NOV-1996	Dealer's Name _____	Engine Size (CID/CC/L) 4.6 L	<input type="checkbox"/> Turbo <input type="checkbox"/> Diesel <input type="checkbox"/> Gas <input checked="" type="checkbox"/> Fuel Injection
<input checked="" type="checkbox"/> New <input type="checkbox"/> Used	City _____ State _____ Zip Code _____	No. Cylinders _____	

Transmission Type	Antilock Brakes	Restraint System	Cruise Control	Drive Train	Vehicle Type	Body Style
<input type="checkbox"/> Manual <input type="checkbox"/> Automatic	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> 3-Point Belt <input type="checkbox"/> Driverside Airbag <input type="checkbox"/> Passengerside Airbag <input type="checkbox"/> Motorbell <input type="checkbox"/> 2-Point Belt	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Front <input checked="" type="checkbox"/> Rear <input type="checkbox"/> 4-Wheel	<input type="checkbox"/> Car <input type="checkbox"/> Van <input type="checkbox"/> Minivan <input type="checkbox"/> Other _____	<input type="checkbox"/> Sport Ult <input type="checkbox"/> Truck <input type="checkbox"/> Motorcycle <input type="checkbox"/> 2-Door <input checked="" type="checkbox"/> 4-Door <input type="checkbox"/> Stationwagon <input type="checkbox"/> Pick Up Truck <input type="checkbox"/> Other _____

FAILED COMPONENT(S)/PART(S) INFORMATION

Component	Part Name(s)	Location	Failed Part(s)
06610001 12420000	EXHAUST SYSTEM:MANIFOLD:OXYGEN SENSOR INTERIOR SYSTEMS:INSTRUMENT PANEL:GAUGE:INDICATOR	<input type="checkbox"/> Left <input type="checkbox"/> Right <input type="checkbox"/> Frnt <input type="checkbox"/> Rear	<input type="checkbox"/> Original <input type="checkbox"/> Replacement
No. of Failures	Date(s) of Failure(s) 27-OCT-2000 Mileage at Failure(s) 47600 Vehicle Speed at Failure(s) 5	Failed Part(s) Available? <input type="checkbox"/> Yes <input type="checkbox"/> No	NHTSA Previously Contacted? <input type="checkbox"/> Yes <input type="checkbox"/> No

APPLICATION INCIDENT INFORMATION

(Please describe in detail the incident(s), failure(s), crash(es), and injury(ies) on the back of this form.)

Crash	Fire	Number of Persons Injured	Number of Fatalities	Estimated Property Damage	Reported to Police
<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	0	0		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

NARRATIVE DESCRIPTION OF FAILURE(S), INCIDENT(S), INJURY(IES)

ON 10/26/2000, THE MASS AIR FLOW SENSOR WAS REPLACED DUE TO THE CHECK ENGINE LIGHT COMING UP AND DIFFICULTY IN STARTING THE VEHICLE. AFTER THE REPLACEMENT, THESE PROBLEMS WERE SOLVED. HOWEVER, A NEW PROBLEM APPEARED. THE VEHICLE STALLED WITHOUT ANY WARNING. IT HAPPENED TWICE WITHIN A 24-HOUR PERIOD. IN BOTH INCIDENTS, IT HAPPENED ON A SLOW LEFT TURN AFTER EXITING AN INTERSTATE HIGHWAY. AT THE SAME TIME, THE POWER STEERING WAS DISABLED. THIS CREATED A MAJOR SAFETY HAZARD SINCE I HAD MINIMAL CONTROL OF THE VEHICLE. IN FACT, I ALMOST HIT A LAMPPOST. I CONTACTED THE DEALER, BUT THEY COULD NOT IDENTIFY THE CAUSE YET. IN FACT, THEY COULD NOT EVEN REPRODUCE THE PROBLEM. I HAVE A FEELING THAT THIS IS DUE TO A DEFECTIVE MASS AIR FLOW SENSOR, BUT THE DEALER DOES NOT AG

CONTINUED ON BACK (REVERSE)

The Privacy Act of 1974-Public Law 93-579 This information is requested pursuant to authority vested in the National Highway Traffic Safety Act and subsequent amendments. You are under no obligation to respond to this questionnaire. Your response may be used to assist the NHTSA in determining whether a manufacturer should take appropriate action to correct a safety defect. If the NHTSA proceeds with administrative enforcement or litigation against a manufacturer, your response, or a statistical summary thereof, may be used in support of the agency's action.