



U.S. Department
of Transportation

National Highway
Traffic Safety
Administration

Auto Safety Hotline

Vehicle Owner's Questionnaire

NATIONWIDE 1-800-424-9393
DC METRO AREA (202) 366-0123
INTERNET: <http://www.nhtsa.dot.gov>

FOR AGENCY USE ONLY 798

Date Received

31-DEC-2001

Od. or

rt_dt

pd_rt

rp_lr

Reference No.

8001282

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>(Location at bottom of windshield and driver's side door)</small>	Vehicle Make	Vehicle Model	Vehicle Year	Current Odometer Reading		
N/A	FORD TRUCK	ECONOLINE	1991			
Purchase Date <input checked="" type="checkbox"/> New <input type="checkbox"/> Used	Dealer's Name _____ City _____ State _____ Zip Code _____		Engine Size (CID/CC/L) _____ No Cylinders _____	<input type="checkbox"/> Turbo <input type="checkbox"/> Diesel <input type="checkbox"/> Gas <input type="checkbox"/> Fuel Injectio		
Transmission Type <input type="checkbox"/> Manual <input type="checkbox"/> Automatic	Antilock Brakes <input type="checkbox"/> Yes <input type="checkbox"/> No	Restraint System <input checked="" type="checkbox"/> 3-Point Belt <input type="checkbox"/> Motorbelt <input type="checkbox"/> Driverside Airbag <input type="checkbox"/> 2-Point Bel <input type="checkbox"/> Passengerside Airbag	Cruise Control <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Drive Train <input type="checkbox"/> Front <input type="checkbox"/> Rear <input type="checkbox"/> 4-Wheel	Vehicle Type <input type="checkbox"/> Car <input type="checkbox"/> Sport Util <input checked="" type="checkbox"/> Van <input type="checkbox"/> Truck <input type="checkbox"/> Minivan <input type="checkbox"/> Motorcycle <input type="checkbox"/> Other _____	Body Style <input type="checkbox"/> 2-Door <input 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 08113000	Part Name(s) FUEL:FUEL TANK ASSEMBLY:TANK	Location <input type="checkbox"/> Left <input type="checkbox"/> Right <input type="checkbox"/> Front <input type="checkbox"/> Rear	Failed Part's <input type="checkbox"/> Original <input type="checkbox"/> Replacement
No of Failure	Dates of Failure(s) 01-DEC-2001 Mileage at Failure(s) 149 Vehicle Speed at Failure(s) _____	Failed Part(s) <input type="checkbox"/> Yes <input type="checkbox"/> No	NHTSA Previously <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 <input type="checkbox"/> Yes <input type="checkbox"/> No	Fire <input type="checkbox"/> Yes <input type="checkbox"/> No	Number of Persons Injured	Number of Fatalities	Estimated Property Damag	Reported to Police <input type="checkbox"/> Yes <input type="checkbox"/> No
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NARRATIVE DESCRIPTION OF FAILURE(S), INCIDENT(S), INJURY(IES)

THERE IS A PROBLEM WITH FUEL TANK LEAKING. SMELL CAN GET INTO VEHICLE. PLEASE PROVIDE MORE INFORMATION.*AK

CONTINUE ON 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.

DOT Auto Safety Hotline		FOR AGENCY USE ONLY 798	
 U.S. Department of Transportation National Highway Traffic Safety Administration		Vehicle Owner's Questionnaire (VOQ) NATIONWIDE 1-888-DASH-2-DOT 1-888-327-4235 www.nhtsa.dot.gov/hotline	
OWNER INFORMATION (Type or Print) [Redacted] 731665		Date Received: 31-DEC-2001 Od or rt_dt: _____ od_rt up_ltr: _____ Reference No.: 8001282	
Do you authorize NHTSA to provide a copy of report to the manufacturer of your vehicle? In the absence of an authorized signature, NHTSA WILL NOT provide your name and address to the vehicle manufacturer.		<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	
Signature of Owner: [Redacted]		Date: / /	
VEHICLE INFORMATION			
Vehicle Ident. No. (VIN) [Located at bottom of windshield or driver's side] 1FTEEE14N7MHB28701	Vehicle Make FORD TRUCK	Vehicle Model ECONOLINE	Vehicle Year 1991
Current Odometer Reading 150456		Purchase Date 1/6/99	
Dealers Name: RICK KELLY		Engine Siz (CID/CC/L) 5.0L	
City LEAGUE CITY State TX Zip Code 77573		No Cylinders 8	
<input checked="" type="checkbox"/> New <input checked="" type="checkbox"/> Used		<input type="checkbox"/> Turbo Diesel Gas <input checked="" type="checkbox"/> Fuel Inject.o	
Transmission Type <input type="checkbox"/> Manual <input checked="" type="checkbox"/> Automatic	Antilock Brakes <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Restraint System <input checked="" type="checkbox"/> 3-Point Belt <input type="checkbox"/> Motorbelt <input type="checkbox"/> Driverside Airbag <input type="checkbox"/> 2-Point Belt <input type="checkbox"/> Passengerside Airbag	Cruise Control <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Drive Train <input type="checkbox"/> Front <input checked="" type="checkbox"/> Rear <input checked="" type="checkbox"/> 4-Wheel		Vehicle Type <input checked="" type="checkbox"/> Van <input type="checkbox"/> Sport Ult Truck <input type="checkbox"/> Minivan <input type="checkbox"/> Motorcycle <input type="checkbox"/> Other	
Body Style <input type="checkbox"/> 2-Door <input type="checkbox"/> 4-Door <input type="checkbox"/> Stationwagon <input type="checkbox"/> Pick Up <input type="checkbox"/> Truck			
FAILED COMPONENT(S)/PART(S) INFORMATION			
Component 06113000	Part Name(s) FUEL TANK ASSEMBLY TANK	Location <input type="checkbox"/> Left Front <input type="checkbox"/> Right Rear	Failed Part(s) <input checked="" type="checkbox"/> Original <input type="checkbox"/> Replacement
FI029B2638	FUEL TANK SELECTOR VALVE		
No. of Failures 1	Date(s) of Failure(s) 01-DEC-2001 Mileage at Failure(s) 149507 Vehicle Speed at Failure(s) 60 MPH	Failed Part(s) <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	NHTSA Previously <input type="checkbox"/> Yes <input checked="" 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 <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Fire <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Number of Persons Injured - 0 -	Number of Fatalities - 0 -
Estimated Property Damage - 0 -		Reported to Police <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
NARRATIVE DESCRIPTION OF FAILURE(S), INCIDENT(S), INJURY(IES)			
<p> THERE IS A PROBLEM WITH FUEL TANK LEAKING. SMELL CAN GET INTO VEHICLE. PLEASE PROVIDE MORE INFORMATION. </p> <p> VAN HAS TWO FUEL TANKS. SELECTOR VALVE IS DEFECTIVE, CAUSING FUEL TO BE PUMPED FROM ONE TANK TO THE OTHER, OVERFLOWING OTHER TANK. FUEL SPEWING FROM FILLER CAP INTO CAB AND ONTO GROUND. FORD HAD A RECALL FOR THIS SITUATION IN DEC, 1991. RECALL # 91539 (SEE ENCLOSED COPY) </p>			
CONTINUE ON BACK IF NEEDED			
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.			

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PROTECT UNWARRANTED INVASION OF
PERSONAL PRIVACY PURSUANT TO
EXEMPTION 6 OF THE FREEDOM OF
INFORMATION ACT, 5 U.S.C. 552(b)(6)**

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