



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 151

Date Received

28-JAN-2002

Od_or _____
rt_dt _____
pd_rt _____
rp_lr _____

Reference No.

8002913

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) (Location at bottom of windshield and driver's side door)		Vehicle Make FORD	Vehicle Model CROWN VICTORY	Vehicle Year 1997	Current Odometer Reading
Purchase Date	Dealer's Name _____		Engine Size (CID/CC/L) _____	☐ Turbo ☐ Diesel ☐ Gas ☐ Fuel Injection	
☐ New ☒ Used	City _____ State _____ Zip Code _____		No Cylinders _____		
Transmission Type ☐ Manual ☐ Automatic	Antilock Brakes ☐ Yes ☐ No	Restraint System ☐ 3-Point Belt ☐ Motorbelt ☒ Driverside Airbag ☐ 2-Point Bel ☐ Passengerside Airbag	Cruise Control ☐ Yes ☐ No	Drive Train ☐ Front ☐ Rear ☐ 4-Wheel	Vehicle Type ☐ Car ☐ Sport Util ☐ Van ☐ Truck ☐ Minivan ☐ Motorcycle ☐ Other _____ Body Style ☐ 2-Door ☐ 4-Door ☐ Stationwagon ☐ Pick Up Truck ☐ Other _____

FAILED COMPONENT(S)/PART(S) INFORMATION

Component 12112100	Part Name(s) INTERIOR SYSTEMS:PASSIVE RESTRAINT:AIR BAG:SIDE DOOR	Location ☐ Left ☐ Right ☐ Front ☐ Rear	Failed Part(s) ☐ Original ☐ Replacement
No of Failure	Dates of Failure(s) _____ Mileage at Failure(s) _____ Vehicle Speed at Failure(s) _____	Failed Part(s) ☐ Yes ☐ No	NHTSA Previously ☐ Yes ☐ 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 ☒ Yes ☐ No	Fire ☐ Yes ☐ No	Number of Persons Injured	Number of Fatalities	Estimated Property Damag	Reported to Police ☐ Yes ☐ No
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NARRATIVE DESCRIPTION OF FAILURE(S), INCIDENT(S), INJURY(IES)

CONSUMER'S VEHICLE FRONT END HIT PASSENGER'S SIDE OF ANOTHER VEHICLE AT 35MPH, AND NEITHER DRIVER'S SIDE NOR PASSENGER'S SIDE AIRBAG DEPLOYED.ALSO, HAD PREVIOUSLY BEEN REAR-ENDED BY A VEHICLE TRAVELING AT 65-70MPH AND PUSHED INTO A TRUCK, AND AIRBAG DEPLOYED THEN. DEALER HAS VEHICLE. *AK

COPIES OF REPORTS - FREE -

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 151	
 U.S. Department of Transportation National Highway Traffic Safety Administration		Vehicle Owner's Questionnaire (VOQ) NATIONWIDE 1-888-DASH-2-DOT 1-888-327-4236 www.nhtsa.dot.gov/hotline	
OWNER INFORMATION (Type or Print) 		DEFECT INVESTIGATION OFFICE 22 JAN 2002 8002913	
Do you authorize NHTSA to provide a copy of report to the manufacturer of your vehicle? ☒ YES ☐ NO In the absence of an authorized signature, please print name and address to the vehicle manufacturer. Signature of Owner		Work Number Home No.	
VEHICLE INFORMATION			
Vehicle Ident. No. (VIN) (Located at bottom of windshield on driver's side) 2FA LP74W3V4218657	Vehicle Make FORD	Vehicle Model CROWN VICTORY	Vehicle Year 1997
Current Odometer Reading 84307		Purchase Date 2/15/2002	
Dealers Name Covert City Austin State TX Zip Code		Engine Size 4.0L V6 No. Cylinders 6	
Transmission Type ☐ Manual ☒ Automatic		Antilock Brakes ☐ Yes ☒ No	
Restraint System ☐ 3-Point Belt ☒ Driverside Airbag ☐ Motorbelt ☐ 2-Point Belt ☐ Passengerside Airbag		Cruise Control ☐ Yes ☐ No	
Drive Train ☐ Front ☐ Rear ☐ 4-Wheel		Vehicle Type ☐ Car ☐ Van ☐ Minivan ☐ Other	
Body Style ☐ 2-Door ☐ 4-Door ☐ Stationwagon ☐ Pick Up ☐ Truck		Fuel Injection ☐ Turbo ☐ Diesel ☒ Gas	
FAILED COMPONENT(S)/PART(S) INFORMATION			
Component 12112100	Part Name(s) INTERIOR SYSTEMS: PASSIVE RESTRAINT: AIR BAG: SIDE DOOR		Location ☐ Left ☒ Front ☐ Right ☐ Rear
Failed Part(s) ☒ Original ☐ Replacement		No. of Failures 2	
Date(s) of Failure(s) July 2000 + Jan 2002 Mileage at Failure(s) Vehicle Speed at Failure(s) 65 30		Failed Part(s) ☐ Yes ☐ No	
NHTSA Previously ☐ Yes ☐ 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 ☒ Yes ☐ No	Fire ☐ Yes ☒ No	Number of Persons Injured 2	Number of Fatalities 0
Estimated Property Damage 202,375.00 12,000 + 9,000		Reported to Police ☒ Yes ☐ No	
NARRATIVE DESCRIPTION OF FAILURE(S), INCIDENT(S), INJURY(IES) CONSUMER'S VEHICLE FRONT END HIT PASSENGER'S SIDE OF ANOTHER VEHICLE AT 30MPH, AND NEITHER DRIVER'S SIDE NOR PASSENGER'S SIDE AIRBAG DEPLOYED. ALSO, HAD PREVIOUSLY BEEN REAR-ENDED BY A VEHICLE TRAVELING AT 65 MPH AND PUSHED INTO A TRUCK, AND AIRBAG DEPLOYED. DEALER HAS VEHICLE. At repair shop. Air bags did not deploy			
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.			