



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 252

Date Received

30-JAN-2002

Od_or _____
rt_dt _____
pd_rt _____
rp_lr _____

Reference No.

8003274

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) (Locate at bottom of windshield or driver's side)		Vehicle Make	Vehicle Model	Vehicle Year	Current Odometer Reading
1FASP34P31W121382		FORD	FOCUS	2001	
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	Antilock Brakes	Restraint System	Cruise Control	Drive Train	Vehicle Type
☐ Manual ☐ Automatic	☐ Yes ☐ No	☐ 3-Point Belt ☐ Driverside Airbag ☐ Passengerside Airbag ☐ Motorbelt ☐ 2-Point Bel	☐ Yes ☐ No	☐ Front ☐ Rear ☐ 4-Wheel	☐ Car ☐ Van ☐ Minivan ☐ Other _____
				☐ Sport Utl ☐ Truck ☐ Motorcycle ☐ Other _____	
				☐ 2-Door ☐ 4-Door ☐ Stationwagon ☐ Pick Up Truck ☐ Other _____	

FAILED COMPONENT(S)/PART(S) INFORMATION

Component 02100000	Part Name(s) SUSPENSION INDEPENDENT FRONT	Location ☐ Left ☐ Right ☐ Front ☐ Rear	Failed Part(s) ☐ Original ☐ Replacement
No of Failure	Dates of Failure(s) 24-JAN-2002 Mileage at Failure(s) 2489 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)

A ROARING AND GRINDING NOISE WAS COMING FROM FRONT WHEELS. DEALERSHIP WAS AWARE OF PROBLEM.*AK

COPIES OF REPORTS ARE KEPT

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.



U.S. Department
of Transportation
National 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

252

Data Received

1/12/02

JAN-2002

DEFECTS INVESTIGATION

Od_or _____
rt_dt _____
od_rt _____
up_itr _____

Reference No.

8003274

OWNER INFORMATION (Type or Print)

6677

Wo - Number

Hon & No

Do you authorize NHTSA to receive a copy of report to the manufacturer of your vehicle?
In the absence of an authorized signature, you must provide your name and address to the vehicle manufacturer.

YES ☒ NO ☐

Signature of Owner

Date 2/1/02

VEHICLE INFORMATION

Vehicle Ident. No. (VIN) (located on dashboard or windshield on driver's side)	Vehicle Make	Vehicle Model	Vehicle Year	Current Odometer Reading
1FASP34P31W121382	FORD	FOCUS	2001	
Purchase Date <u>NEW</u> <u>00/22/00</u>	Dealer's Name <u>LONG BEACH PACIFIC FORD</u> <u>3400 SUMMIT AVE</u>		Engine Size (CID/CC/L)	☐ Turbo ☐ Diesel ☐ Gas ☐ Fuel Injectio
☐ New ☒ Used	City <u>LONG BEACH</u> State <u>CA</u> Zip Code <u>90807</u>		No. Cylinders <u>4</u>	
Transmission Type ☒ Manual ☒ Automatic	Antilock Brakes ☐ Yes ☐ No	Restraint System ☒ 3-Point Belt ☐ Motorbelt ☒ Driverside Airbag ☐ 2-Point Belt ☒ Passengerside Airbag	Cruise Control ☒ Yes ☐ No	Drive Train ☐ Front ☐ Rear ☐ 4-Wheel
Vehicle Type ☒ Car ☐ Van ☐ Minivan ☐ Other		Body Style ☐ Sport Utl ☐ Truck ☐ Motorcycle ☐ 2-Door ☐ 4-Door ☐ Stationwagon ☐ Pick Up ☐ Truck		

FAILED COMPONENT(S)/PART(S) INFORMATION

Component 02100000	Part Name(s) SUSPENSION-INDEPENDENT FRONT	Location ☒ Left ☒ Front ☒ Right ☒ Rear	Failed Part(s) ☒ Original ☐ Replacemen
No of Failures 5	Date(s) of Failure(s) <u>24-JAN-2002</u> <u>12/26/00</u> <u>5/5/01</u> <u>1/1/02</u> Mileage at Failure(s) <u>2499</u> <u>1/25/02</u> <u>2/1/02</u> 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(es) on the back of this form)

Crash ☐ Yes ☒ No	Fire ☐ Yes ☒ No	Number of Persons Injured <u>N/A</u>	Number of Fatalities <u>N/A</u>	Estimated Property Damage <u>N/A</u>	Reported to Police ☐ Yes ☒ No
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NARRATIVE DESCRIPTION OF FAILURE(S), INCIDENT(S), INJURY(IES)

A ROARING AND GRINDING NOISE WAS COMING FROM FRONT WHEELS. DEALERSHIP WAS AWARE OF PROBLEM. *AK

NOTE: Something wrong

BRAKES SHOULD NOT
BE GRINDING + MAKING
NOISE LIKE THAT EVERY
(2) Two months.

THANK YOU

[Signature]

The Privacy Act of 1974-Public Law 93-577 and subsequent amendments. You are hereby notified that the information you provide will be used to determine whether a manufacturer should be subject to enforcement or litigation against a manufacturer.

CONTINUE ON BACK IF NEEDED

This National Highway Traffic Safety Act and the information you provide will be used to assist the NHTSA in its administrative action. A proceeds with administrative action used in support of the agency's action.



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of Transportation
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Traffic Safety
Administration

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NATIONWIDE 1-888-DASH-2-DOT

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FOR AGENCY USE ONLY

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Date Received

12-15-01

20 JAN 2002

DEFECTS INVESTIGATION

Od_or

rt_dt

od_rt

up_ltr

Reference No.

8003274

OWNER INFORMATION (Type or Print)

738677

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, you must provide your name and address to the vehicle manufacturer.

Signature of Owner

Date 2/11/02

VEHICLE INFORMATION

Vehicle Ident. No. (VIN) (Located on driver's side windshield or driver's side)	Vehicle Make	Vehicle Model	Vehicle Year	Current Odometer Reading
1FASP34P31W121382	FORD	FOCUS	2001	
Purchase Date NEW 00/22/00	Dealer's Name LONG BEACH PACIFIC FORD 3600 CHERRY AVE		Engine Size CID/COIL 2.0L	☐ Turbo ☐ Diesel ☐ Gas ☐ Fuel Injection
☐ New ☒ Used	City LONG BEACH State CA Zip Code 90807		No. Cylinders 4	
Transmission Type ☒ Manual ☒ Automatic	Antilock Brakes ☐ Yes ☐ No	Restraint System ☒ 3-Point Belt ☐ Motorbelt ☒ Driverside Airbag ☐ 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	

FAILED COMPONENT(S)/PART(S) INFORMATION

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No. of Failures 5	Date(s) of Failure(s) 24-JAN-2002 12/26/00, 5/5/01, 1/1/02 Mileage at Failure(s) 2489 1/25/02, 2/11/02 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 N/A	Number of Fatalities N/A	Estimated Property Damage N/A	Reported to Police ☐ Yes ☒ No
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NARRATIVE DESCRIPTION OF FAILURE(S), INCIDENT(S), INJURY(IES)

A ROARING AND GRINDING NOISE WAS COMING FROM FRONT WHEELS. DEALERSHIP WAS AWARE OF PROBLEM. *AK

*NOTE: SOMETHING WRONG
BRAKES SHOULD NOT
BE GRINDING + MAKING
NOISE LIKE THAT EVERY
(2) TWO MONTHS.*

CONTINUE ON BACK IF NEEDED

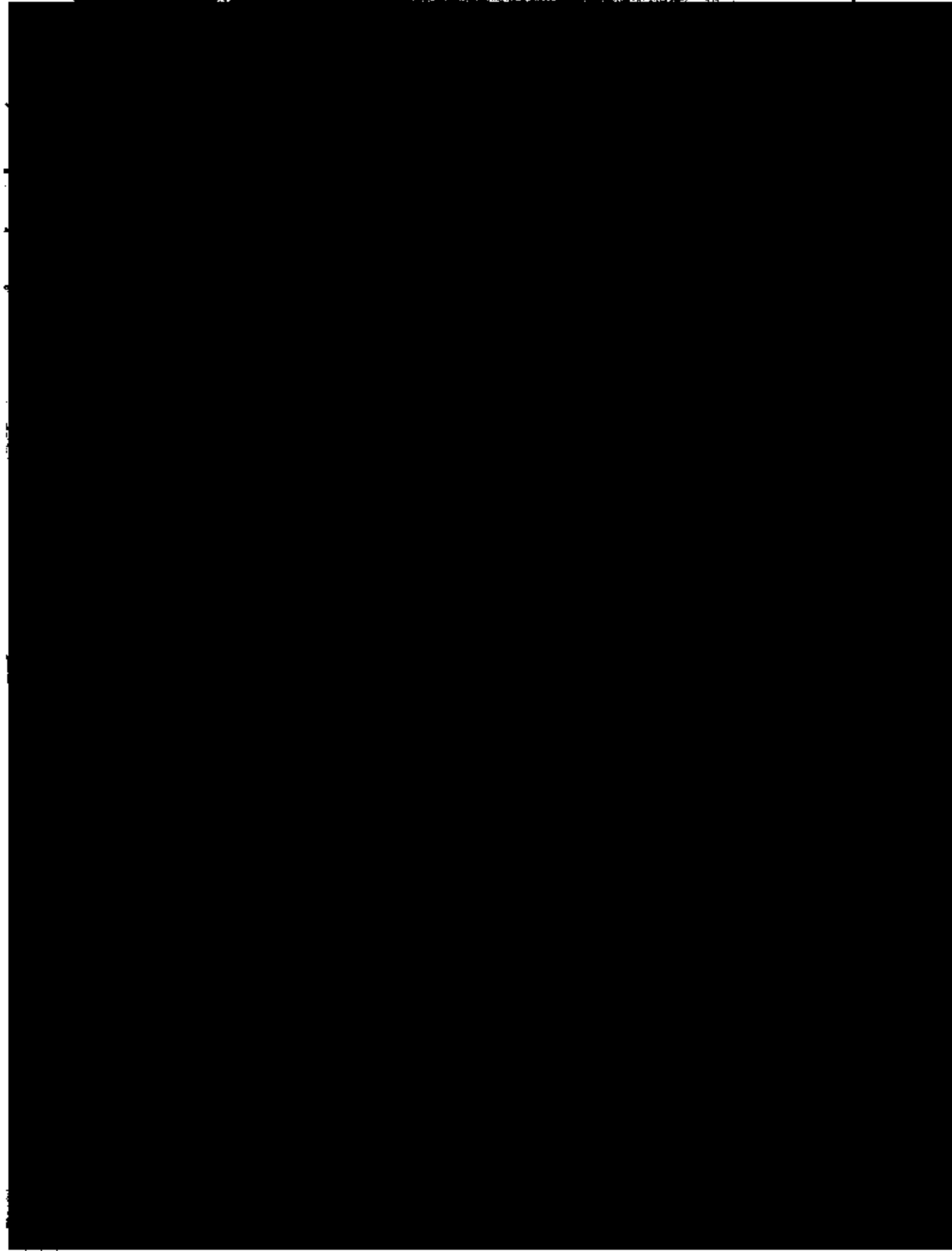
The Privacy Act of 1974-Public Law 93-57, and subsequent amendments. You are under no obligation to determine whether a manufacturer should be subject to enforcement or litigation against a manufacturer.

The National Highway Traffic Safety Act and the Federal Motor Vehicle Safety Standards are used to assist the NHTSA in determining whether a manufacturer should be subject to administrative action or enforcement in support of the agency's action.

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

(Page 1 through Page 26)

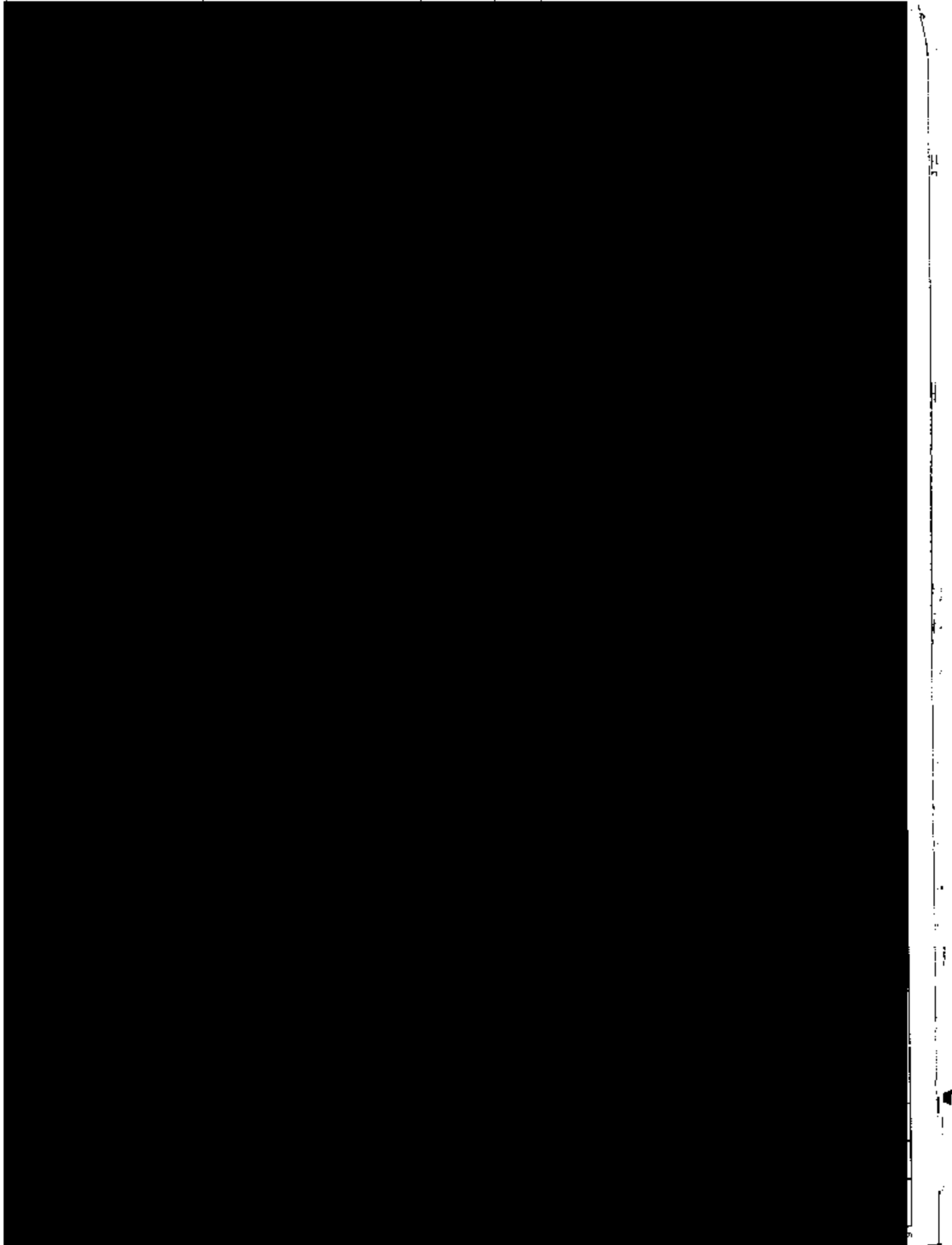
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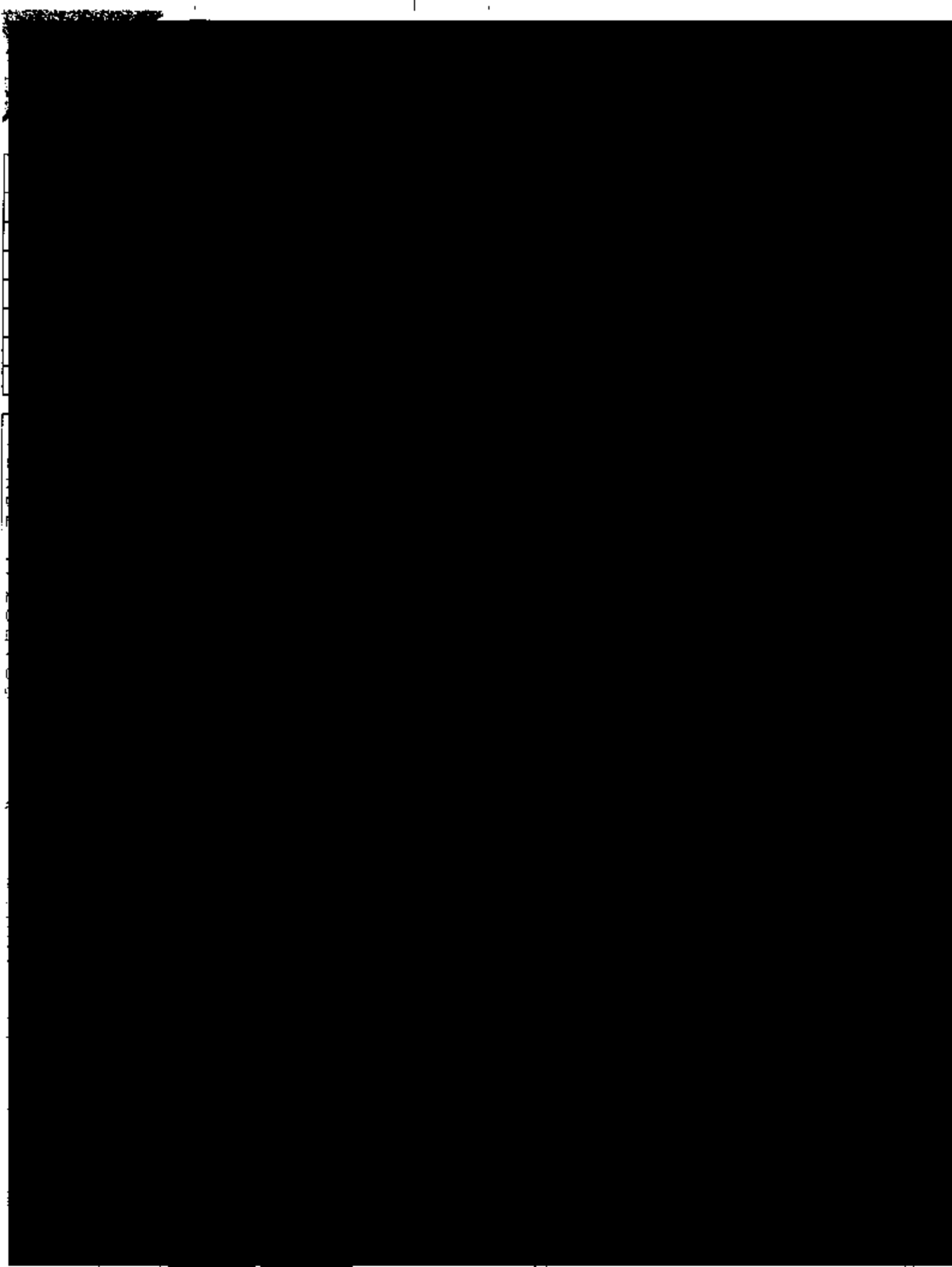


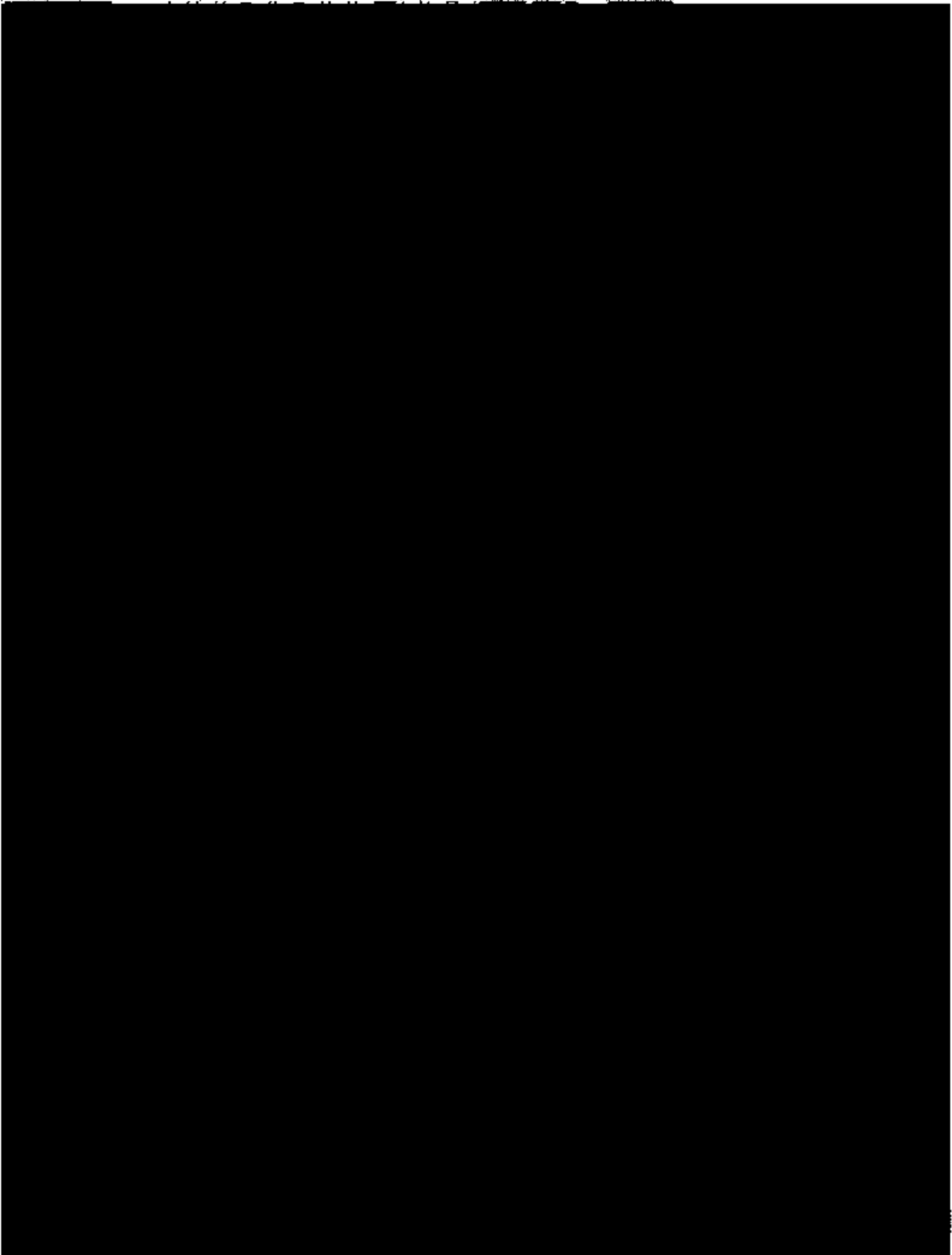


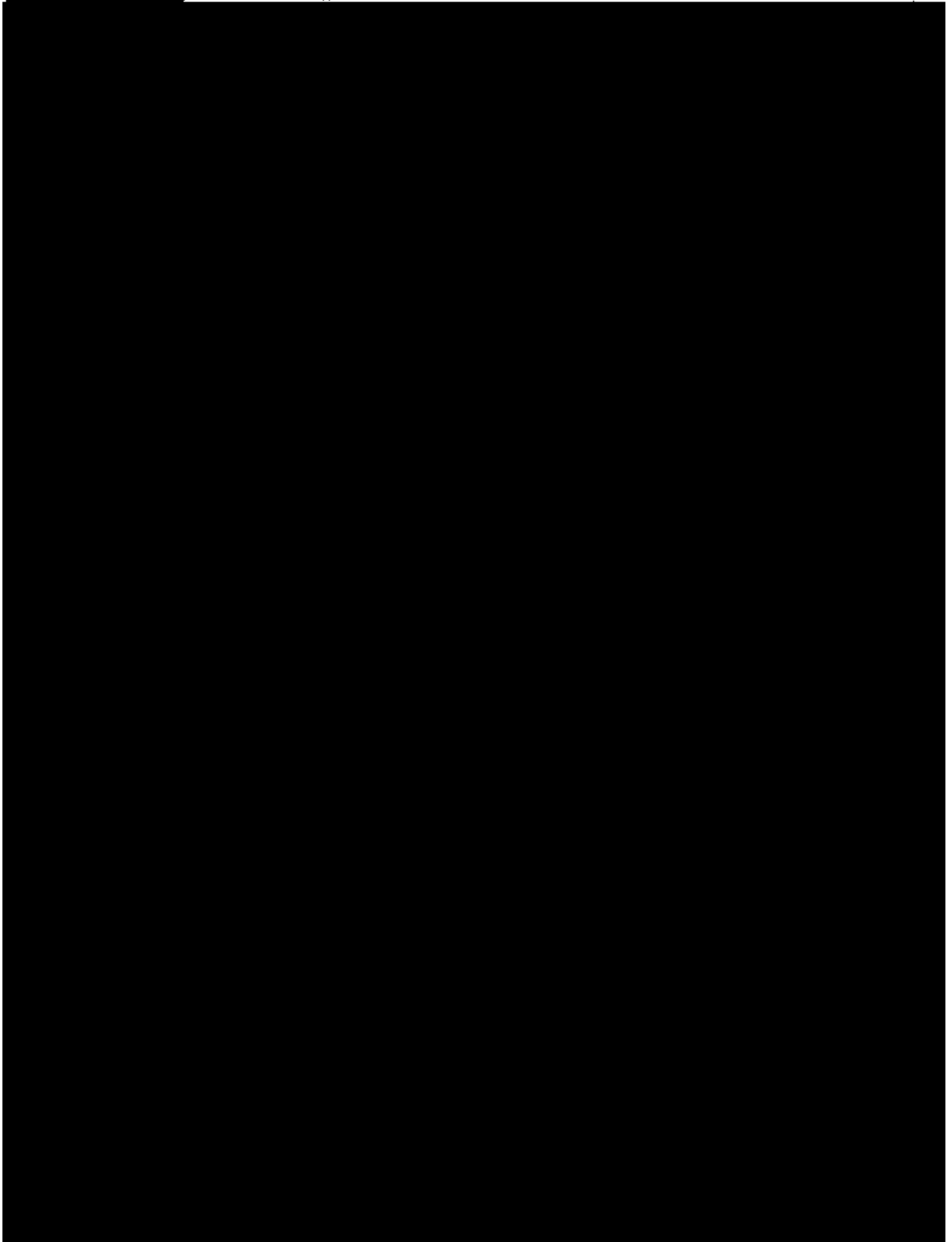
[The page contains a large, dense block of text that is mostly illegible due to extreme blurring and low contrast. The text appears to be a continuous paragraph or a list of items, but the individual words and sentences cannot be discerned.]

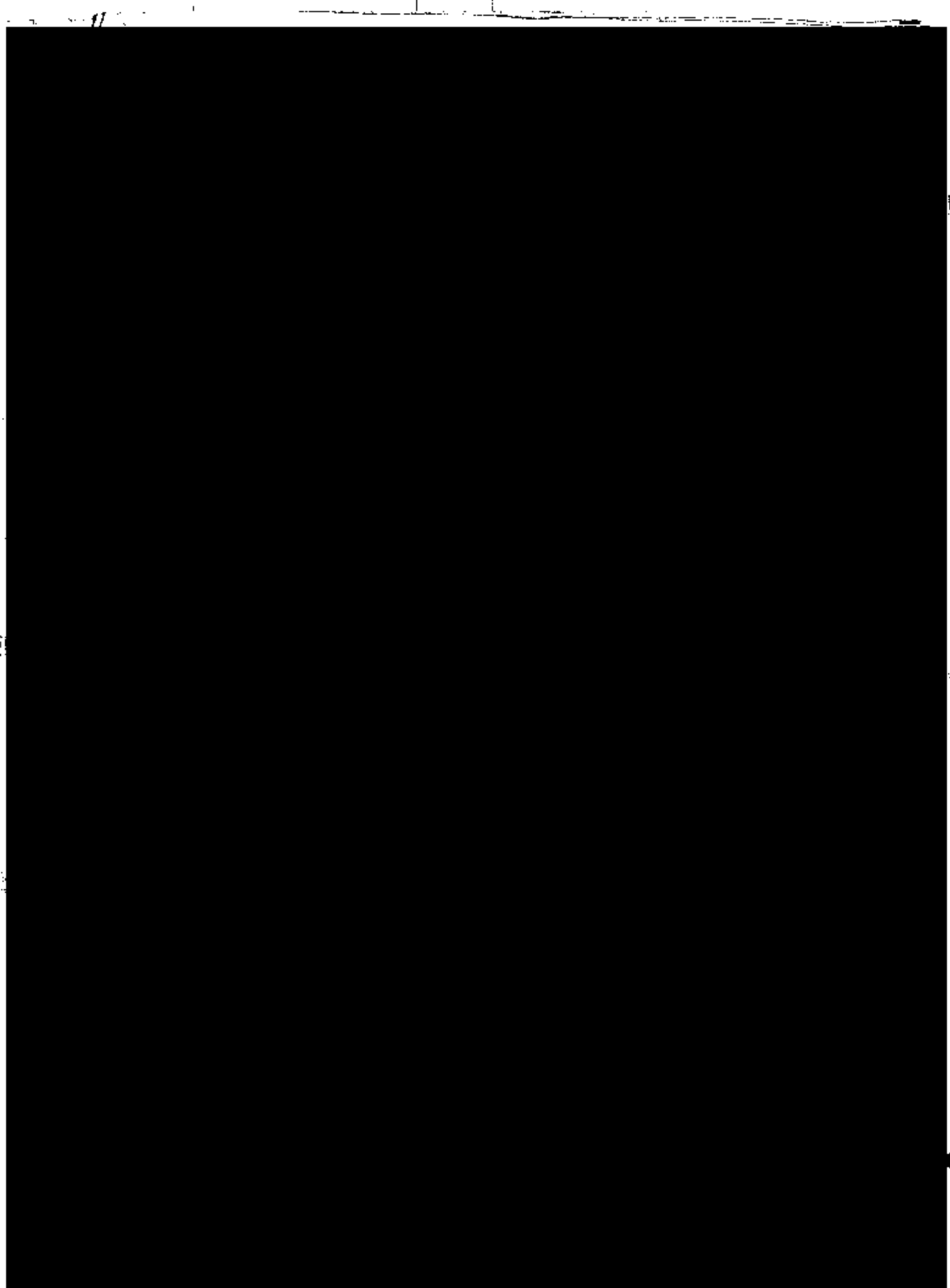
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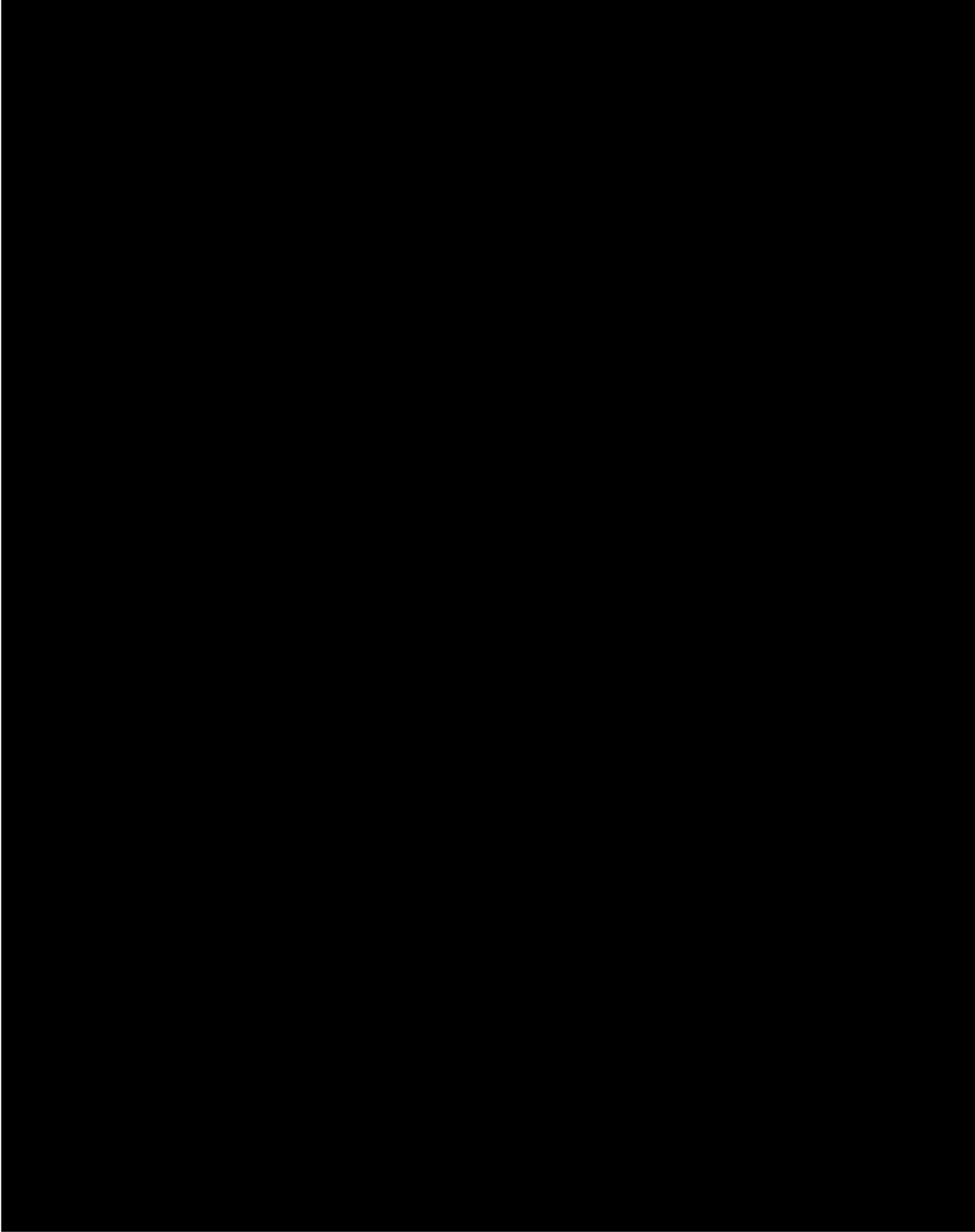


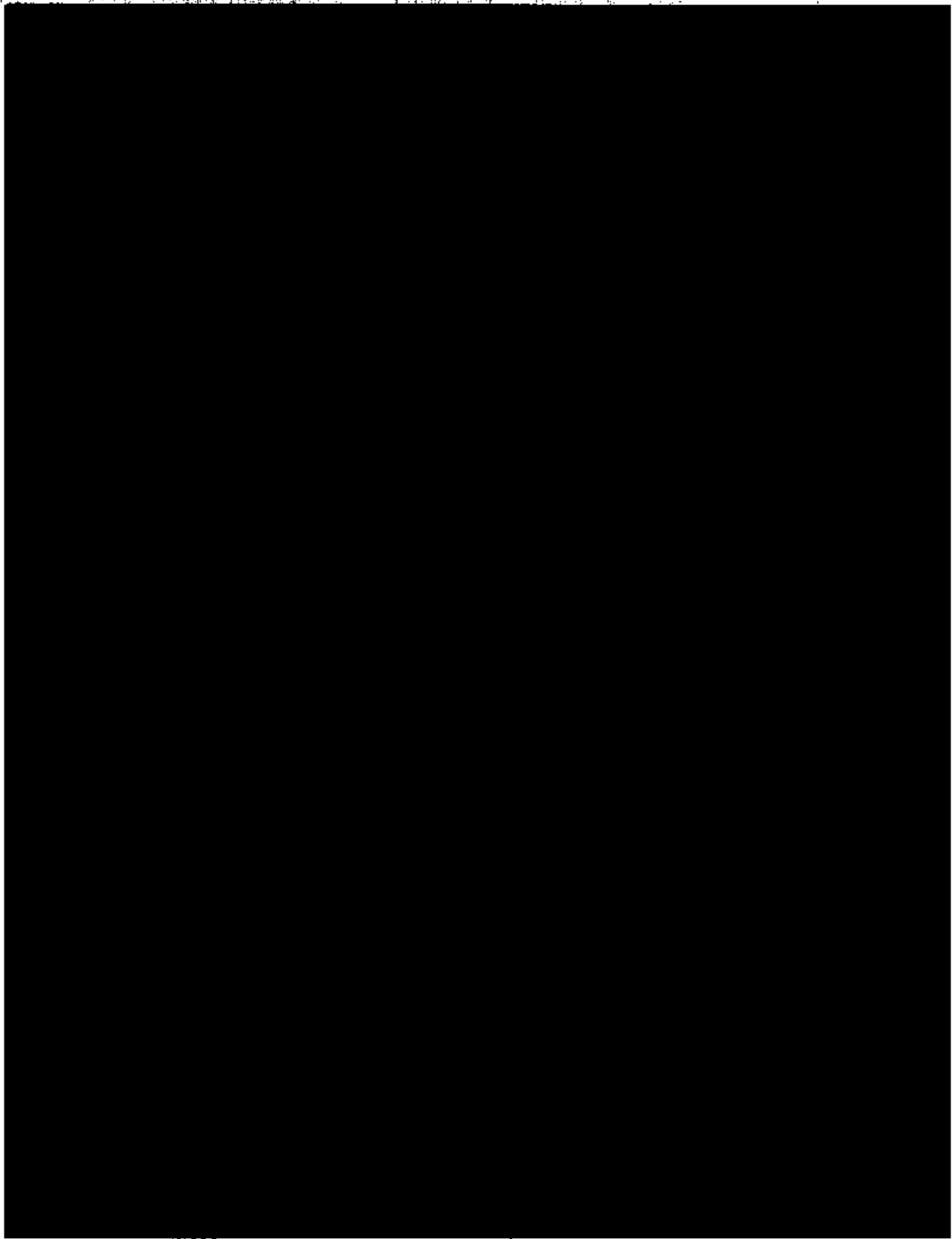












the 1990s, the number of people in the UK who are aged 65 and over has increased from 10.5 million to 13.5 million, and the number of people aged 75 and over has increased from 4.5 million to 6.5 million (Office for National Statistics 2000). The number of people aged 65 and over is projected to increase to 16.5 million by 2020, and the number of people aged 75 and over to 8.5 million (Office for National Statistics 2000).

There is a growing awareness of the need to address the needs of older people in the UK, and a number of initiatives have been launched to address this need. The Department of Health has launched the 'Ageing Well' initiative, which aims to improve the lives of older people by addressing their needs in a number of areas, including health, social care, and housing (Department of Health 2000).

The 'Ageing Well' initiative is a multi-departmental effort, involving the Department of Health, the Department of Social Security, the Department of the Environment, and the Department of Transport. The initiative is based on the principle that older people should be able to live well, and that this should be achieved by addressing their needs in a number of areas, including health, social care, and housing.

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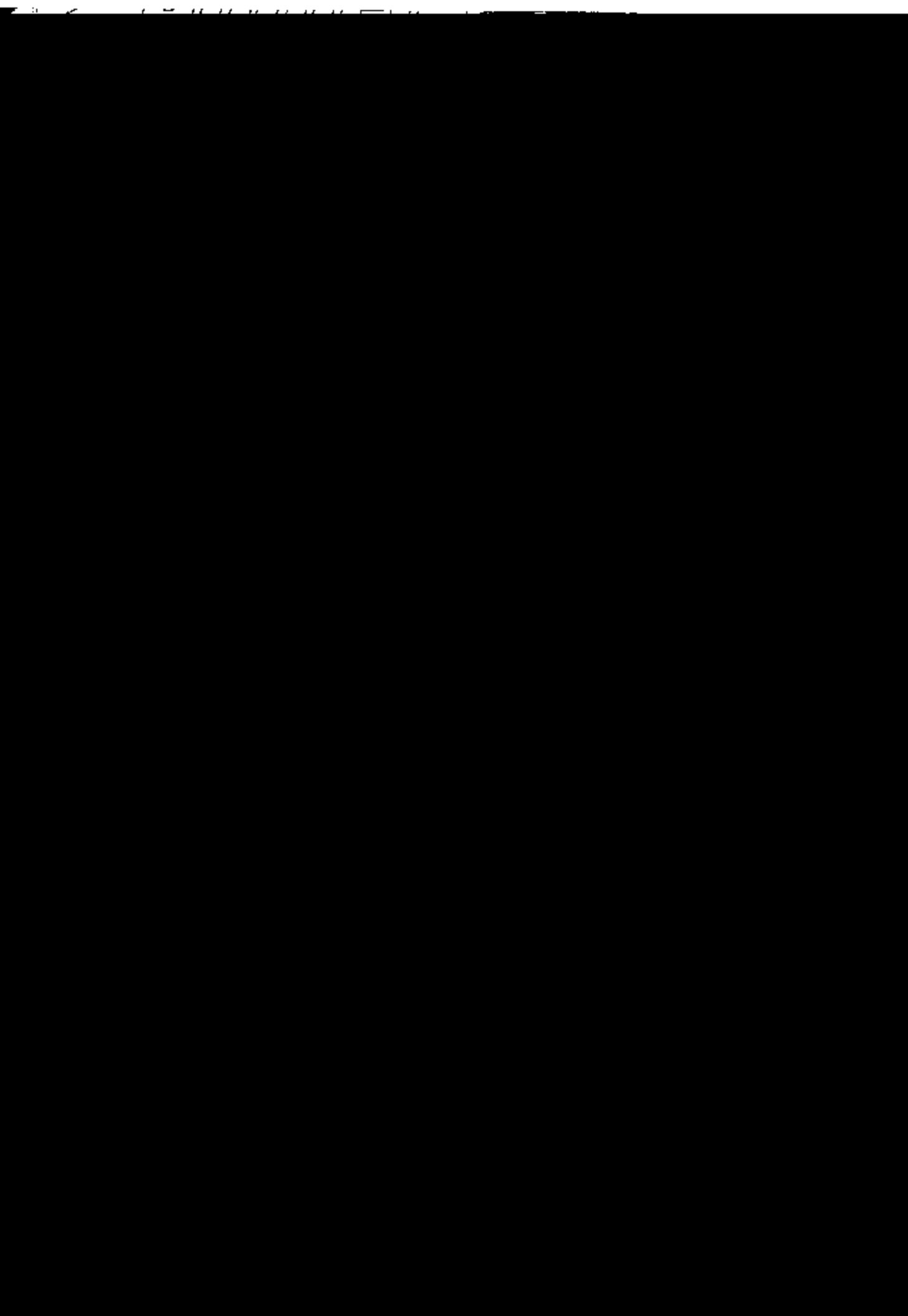
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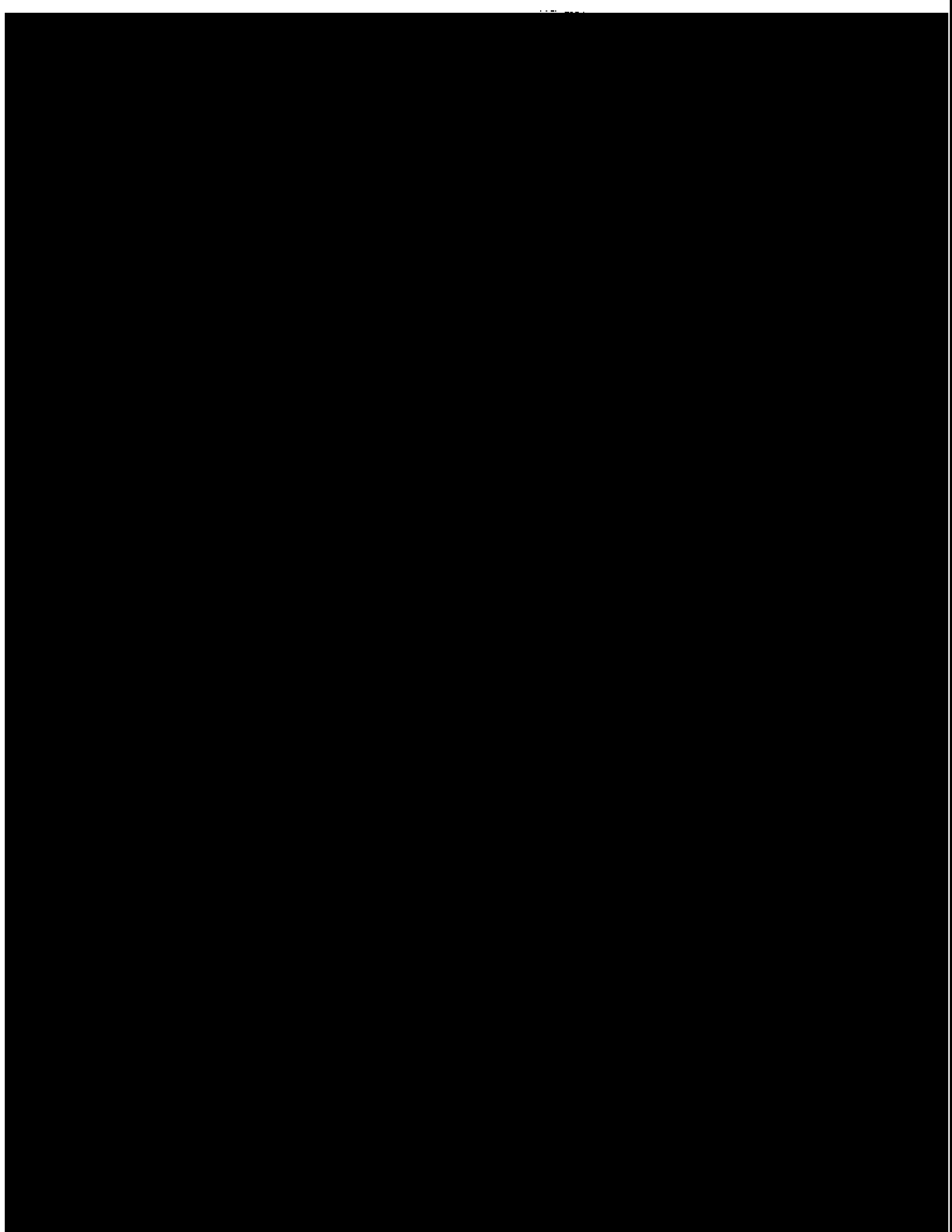
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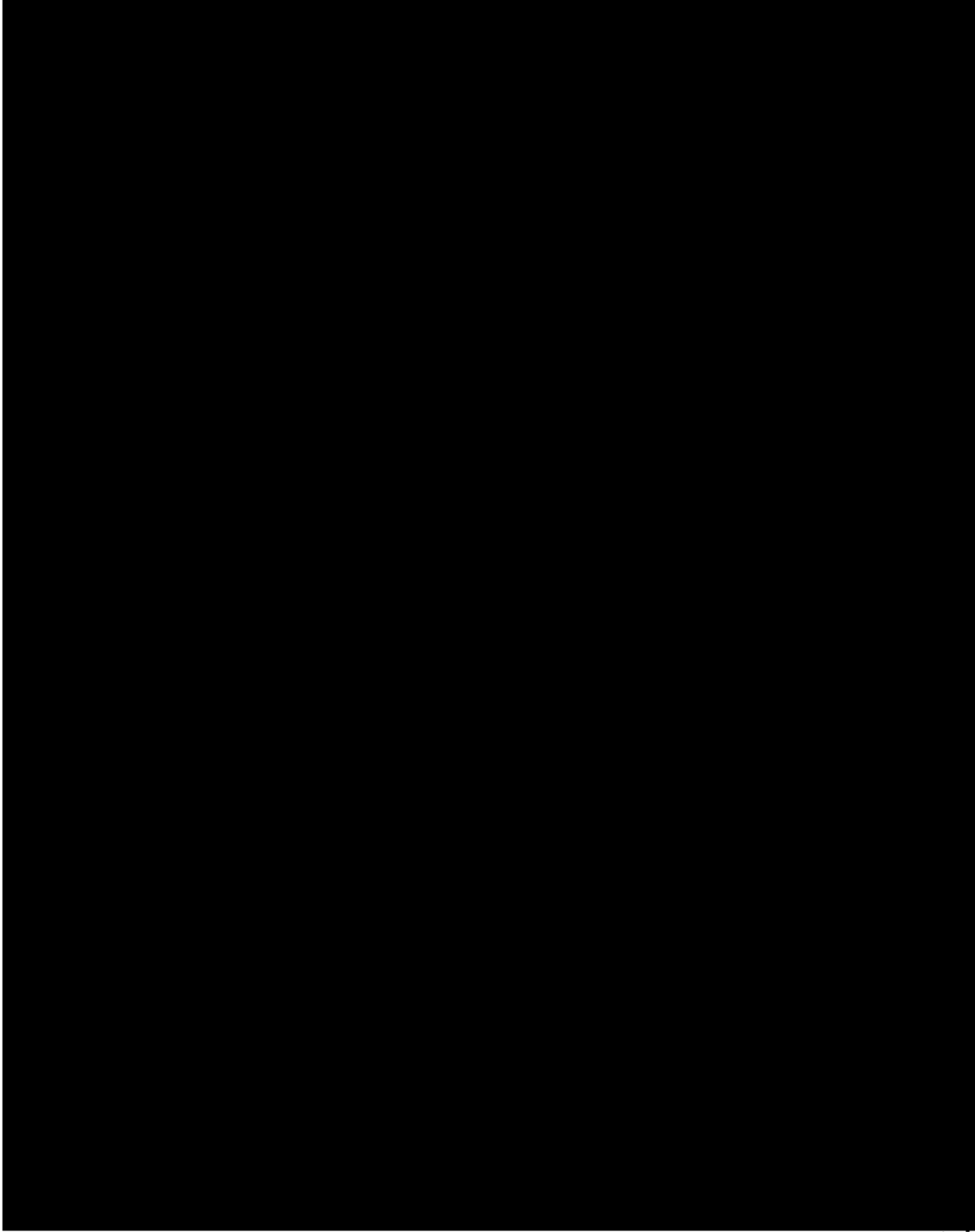
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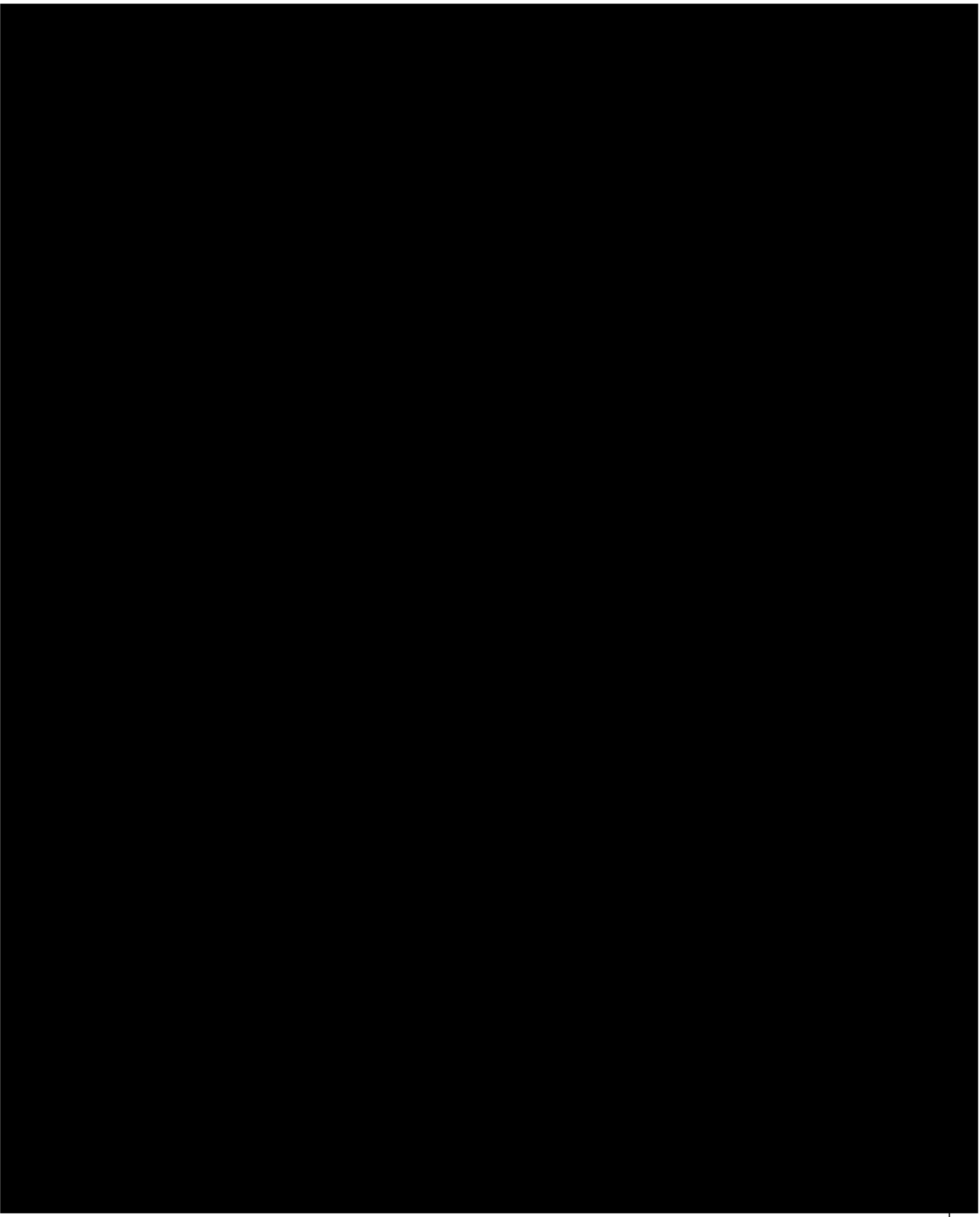
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ON CREDIT TO ALL
CUSTOMER'S ACCOUNTS

STATE OF NEW YORK

SEAL

