



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 1220

Date Received

25-FEB-2002

Od_or _____
rt_dt _____
pd_rt _____
rp_lr _____

Reference No.

8004508

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
1FALP5241SG264933		FORD	TAURUS	1995	
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 _____
					Body Style
					☐ 2-Door ☐ 4-Door ☐ Stationwagon ☐ Pick Up Truck ☐ Other _____

FAILED COMPONENT(S)/PART(S) INFORMATION

Component 05150021	Part Name(s) ENGINE:GASKETS:VALVE COVER	Location ☐ Left ☐ Right ☐ Front ☐ Rear	Failed Part's ☐ Original ☐ Replacement
No of Failure	Dates of Failure(s) _____ Mileage at Failure(s) 115000 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)

WHILE DRIVING HEAD GASKET BLEWOUT, AND ANTIFREEZE LEAKED INTO EXHAUST SYSTEM. PLEASE PROVIDE ANY FURTHER INFORMATION.*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.

 DOT Auto Safety Hotline U.S. Department of Transportation National Highway Traffic Safety Administration 1-888-DASH-2-DOT 1-888-327-4236 www.nhtsa.dot.gov/hotline		Vehicle Owner's Questionnaire (VOQ) RECEIVED 18-FEB-2002 DEFECT INVESTIGATION WORK NUM: 740396 HOME NUM: 8004508 Reference No.	
FOR AGENCY USE ONLY 1220		Do you authorize NHTSA to provide a copy of report to the manufacturer of your vehicle? ☒ YES ☐ NO In the absence of a written authorization, NHTSA will not contact the name and address to the vehicle manufacturer. Signature of Owner: _____ Date: 3/16/02	
VEHICLE INFORMATION Vehicle Ident. No. (VIN): [redacted] Vehicle Make: FORD Vehicle Model: TAURUS Vehicle Year: 1995 Current Odometer Reading: 113,000		Purchase Date: _____ Dealer's Name: Private Owner City: _____ State: _____ Zip Code: _____ Used ☒ New ☐ Engine Size (CID/CCL): 381 No Cylinders: 8 Turbo ☐ Diesel ☐ Gas ☒ Fuel Injection ☐	
FAILED COMPONENT(S)/PART(S) INFORMATION Transmission Type: ☒ Automatic ☐ Manual Antilock Brakes: ☐ Yes ☐ No Restraint System: ☒ 3-Point Belt ☐ 2-Point Belt ☐ Driver's Side Airbag ☒ Passenger's Side Airbag Cruise Control: ☐ Yes ☒ No Drive Train: ☒ Front ☐ Rear ☐ 4-Wheel Vehicle Type: ☒ Car ☐ Van ☐ Minivan ☐ Motorcycle ☐ Other Body Style: ☒ 2-Door ☐ 4-Door ☐ Station Wagon ☐ Pick Up ☐ Truck		APPLICATION INCIDENT INFORMATION Component: 05150021 Part Name(s): ENGINE:GASKETS:VALVE COVER Location: ☐ Front ☐ Rear ☐ Right ☒ Left Failed Part(s): ☒ Original ☐ Replacement Date(s) of Failure(s): _____ Mileage at Failure(s): 115000 Vehicle Speed at Failure(s): _____ No of Failures: _____ Failed Parts: ☐ Yes ☐ No Previously Failed: ☐ Yes ☐ No NHTSA: ☐ Yes ☐ No	
NARRATIVE DESCRIPTION OF FAILURE(S), INCIDENT(S), INJURY(IES) WHILE DRIVING HEAD GASKET BLEWOUT, AND ANTIFREEZE LEAKED INTO EXHAUST SYSTEM. PLEASE PROVIDE ANY FURTHER INFORMATION, IF ANY.		Crash: ☐ Yes ☐ No Fire: ☐ Yes ☐ No Number of Persons Injured: _____ Number of Fatalities: _____ Estimated Property Damage: _____ Reported to Police: ☐ Yes ☐ No	
(Please describe in detail the incident(s), failure(s), and injury(ies) on the back of this form)			

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Fold to show Return Address (no stamp needed) Fasten with tape or staple and mail

INFORMATION ON TIRE FAILURE(S) (IF APPLICABLE)

TIRE IDENTIFICATION NO.*

D O T

MANUFACTURER/TIRE NAME

SIZE

* The identification number consists of 7 to 10 letters and numerals following the letters DOT. It is usually located near the rim flange on the side opposite the whitewall or on either side of a blackwall tire.

NARRATIVE DESCRIPTION (CONTINUED)

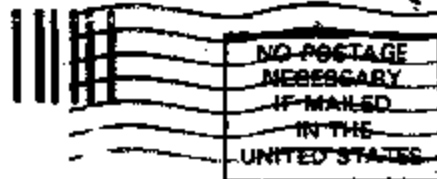
If Ford had gotten this information out to its customers about having a major problem with the 3.8 Ltr engine and the head gaskets being defective I would not have this problem now. They were under the head gaskets for 7 years or 100,000 miles. Well the car is just 7 years old now and should be covered under this safety issue. I look forward to hearing from my Ford dealer so they can bring this issue to a quick and safe solution.

☆ U.S. G.P.O. 1992 - 623-8271 50085

U.S. Department
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Administration

400 Seventh St., S.W.
Washington, D.C. 20590

Official Business
Penalty for Private Use \$300



BUSINESS REPLY MAIL

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POSTAGE WILL BE PAID BY NATL HWY TRAFFIC SAFETY ADMIN.

U.S. Department of Transportation
National Highway Traffic Safety Administration
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