Form Approved: OMB No. 2127-0001

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 336

Date Received: **08-MAY-2002**

Od_or ____ ____
rt_dt ____ ____
od_rt ____ ____
up_ltr ____ ____

Reference No. **8009420**

[redacted]

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.)	Vehicle Make	Vehicle Model	Vehicle Year	Current Odometer Readin
NOT AVAILABLE	**FORD TRUCK**	**F350**	**2000**	

Purchase Dat: ☐ New ☒ Used

Dealer's Name_____ City_____ State_____ Zip Code_____

Engine Size (CID/CC/L ____ No Cylinders ____

☐ Turbo ☐ Diesel ☐ Gas ☐ Fuel Injectio

Transmission Type	Antilock Brakes	Restraint System	Cruise Contro	Drive Trai	Vehicle Type	Body Style
☐ Manual ☐ Automatic	☐ Yes ☐ No	☐ 3-Point Belt ☐ Motorbelt ☐ Driverside Airbag ☐ 2-Point Bel ☐ Passengerside Airbag	☐ Yes ☐ No	☐ Front ☐ Rear ☐ 4-Wheel	☐ Car ☐ Sport Ult ☐ Van ☐ Truck ☐ Minivan ☐ Motorcycle ☐ Other_____	☐ 2-Door ☐ 4-Door ☐ Stationwagon ☒ Pick Up Truck ☐ Other_____

FAILED COMPONENT(S)/PART(S) INFORMATION

Component	Part Name(s	Location	Failed Part(s
09305000 09306000	LIGHTING:FUSE:TAIL LIGHTS LIGHTING:FUSE:BRAKE LIGHTS	☐ Left ☐ Right ☐ Front ☐ Rear	☐ Original ☐ Replacement

No of Failure	Dates of Failure(s)	Failed Part(s)	NHTSA Previously
	04-APR-2002	☐ Yes ☐ No	☐ Yes ☐ No
	Mileage at Failure(s 100		
	Vehicle Speed at Failure(s)		

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 Fatalitie	Estimated Property Damag	Reported to Polic
☐ Yes ☐ No	☐ Yes ☐ No				☐ Yes ☐ No

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

WHILE DRIVING TAIL LIGHTS WENT OUT WITHOUT WARNING, AND CONSUMER WAS ALMOST REAR ENDED. TOOK VEHICLE TO DEALER, AND THEY STATED THAT A CONNECTION TO STOP LIGHT HAD COME LOOSE. DEALER RECONNECTED WIRE. A MONTH LATER, TAIL LIGHTS, AND BRAKE LIGHTS WENT OUT. TOOK BACK TO DEALER, PROBLEM KEPT REOCCURRING. PLEASE PROVIDE ANY FURTHER INFOMATION. *AK

CONTINUE ON REVERSE SIDE

Form Approved: O.M.B. No. 2127-0008

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 335

Date Received: 08-MAY-2002

Od_or
rt_dt
od_rl
up_ltr

Reference No. 8009420

OWNER INFORMATION (Type or Print)

[redacted] 752884

DETROIT MI [redacted]

Work Number [redacted]

Home Number [redacted]

Do you authorize NHTSA to provide a copy of report to the manufacturer of your vehicle? ☐ YES ☒ NO
In the absence of a [redacted] name and address to the vehicle manufacturer.

Signature of Owner [redacted] Date 6/1/02

VEHICLE INFORMATION

Vehicle Ident. No. (VIN.) (Located at bottom of windshield on driver's side)	Vehicle Mak	Vehicle Mode	Vehicle Year	Current Odometer Readin
3FDWF36S74MA 1201 NOT AVAILABLE	FORD TRUCK	F350	2000	

Purchase Date

☒ New [redacted]

Dealer's Name AUTO FORD, INC

City Southfield State MI Zip Code 48075

Engine Siz (CID/CC/L 6.10

No Cylinders 16

☐ Turbo ☐ Diesel ☒ Gas ☒ Fuel Injectio

Transmission Type	Antilock Brakes	Restraint System	Cruise Contro	Drive Trai	Vehicle Type	Body Style
☐ Manual ☒ Automatic	☒ Yes ☐ No	☐ 3-Point Belt ☐ Motorbelt ☒ Driverside Airbag ☐ 2-Point Bel ☒ Passengerside Airbag	☒ Yes ☐ No	☐ Front ☒ Rear ☐ 4-Wheel	☐ Car ☐ Sport Uit ☐ Van ☒ Truck ☐ Minivan ☐ Motorcycle ☐ Other	☐ 2-Door ☐ 4-Door ☐ Stationwagon ☒ Pick Up Truck

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Component	Part Name(s)	Location	Failed Part(s)
09305000 09306000	LIGHTING:FUSE:TAIL LIGHTS LIGHTING:FUSE:BRAKE LIGHTS	☐ Left ☐ Right ☐ Front ☐ Rear	☒ Original ☐ Replacement

No of Failures: 8

Date(s) of Failure(s): 04-APR-2002
Mileage at Failure(s): 100
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	Fire	Number of Persons Injured	Number of Fatalities	Estimated Property Damage	Reported to Police
☐ Yes ☐ No	☐ Yes ☐ No				☐ Yes ☐ No

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

WHILE DRIVING TAIL LIGHTS WENT OUT WITHOUT WARNING, AND CONSUMER WAS ALMOST REAR ENDED, TOOK VEHICLE TO DEALER, AND THEY STATED THAT A CONNECTION TO STOP LIGHT HAD COME LOOSE. DEALER RECONNECTED WIRE. A MONTH LATER, TAIL LIGHTS, AND BRAKE LIGHTS WENT OUT. TOOK BACK TO DEALER, PROBLEM KEPT REOCCURRING. PLEASE PROVIDE ANY FURTHER INFOMATION. *AK

CONTINUE ON BACK IF NEEDED

Narrative Description of Incident(s), Failure(s), Crash(es), and Injury(ies)

Lightning has Fried Several times - Oil leak on Vehicle - Lock on Sliding Cover door Frozen Well Complaint To Ford World Headquarters In Dearborn Robin Marshall - Proof Enclosed To Show I have Paid out Funds To Which Ford Charged Me For Warranty Problem - Problem Was Never Correctly Solved - Almost Impossible to get into Distract Court Dearborn. This has been Number of Complaints of Ford Wiring - I Request A Recall on this Truck Listed here - More Information As So Enclosed -

ATTACH ADDITIONAL SHEETS IF NECESSARY

US Department of Transportation

National Highway Traffic Safety Administration

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

Official Business
Penalty for Private Use $300

BUSINESS REPLY MAIL
FIRST CLASS PERMIT NO 73173 WASHINGTON, D.C.

POSTAGE WILL BE PAID BY NATL. HWY. TRAFFIC SAFETY ADMIN.

U.S. Department of Transportation
National Highway Traffic Safety Administration
DOT Auto Safety Hotline, NSA-10.1
400 7th Street, SW
Washington, DC 20590

NO POSTAGE NECESSARY IF MAILED IN THE UNITED STATES

2002 JUN 12 A 10:54

VEHICLE OWNER'S QUESTIONNAIRE

DOT AUTO SAFETY HOTLINE

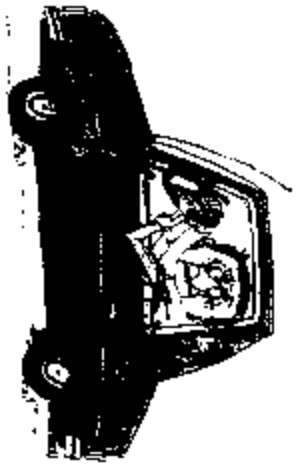
TO REPORT VEHICLE SAFETY DEFECTS COMPLETE THIS FORM
OR

DASH2DOT

and dial toll free at

1-888-DASH-2-DOT
1-888-327-4236

DOT Auto Safety Hotline
(DASH) 2 DOT



U.S. Department of Transportation
National Highway Traffic Safety Administration
http://www.nhtsa.dot.gov/hotline

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

(Page 1 through Page 17)

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up_ltr ____ ____

Reference No. 8009420

[redacted] S 752884

DETROIT MI [redacted]

Work Numbe [redacted]
Home Numb [redacted]

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In the absence of a [redacted] your name and address to the vehicle manufacturer.

Signature of Owne [redacted] Date 6/1/02

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3FDWF36S 74MA 1201 NOT AVAILABLE	FORD TRUCK	F350	2000	

Purchase Date: ☒ New [redacted]

Dealer's Name: AUTO FAIR, INC
City: Southfield State: MI Zip Code: 48076

Engine Siz (CID/CC/L: 410
No Cylinders: 10

☐ Turbo ☐ Diesel ☒ Gas ☐ Fuel Injectio

Transmission Type	Antilock Brakes	Restraint System	Cruise Contro	Drive Trai	Vehicle Type	Body Style
☐ Manual ☒ Automatic	☒ Yes ☐ No	☐ 3-Point Belt ☐ Motorbelt ☒ Driverside Airbag ☐ 2-Point Bel ☒ Passengerside Airbag	☒ Yes ☐ No	☐ Front ☒ Rear ☐ 4-Wheel	☐ Car ☐ Sport Uti ☐ Van ☒ Truck ☐ Minivan ☐ Motorcycle ☐ Other	☐ 2-Door ☐ 4-Door ☐ Stationwagon ☒ Pick Up ☐ Truck

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Vehicle Speed at Failure(s): ____

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NHTSA Previously: ☐ Yes ☒ No

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CONTINUE ON BACK IF NEEDED

X

AUTHORIZED REPRESENTATIVE

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