



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

Ord. or
rt. dt
pd. rt
rp. ltr

Reference No.

8009420

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)	Vehicle Make	Vehicle Model	Vehicle Year	Current Odometer Reading
NOT AVAILABLE	FORD TRUCK	F350	2000	
Purchase Date ☐ New ☒ Used	Dealer's Name _____ City _____ State _____ Zip Code _____		Engine Size (CID/CC/L) _____ No Cylinders _____	☐ Turbo ☐ Diesel ☐ Gas ☐ Fuel Injection
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 09305000 09306000	Part Name(s) LIGHTING:FUSE:TAIL LIGHTS LIGHTING:FUSE:BRAKE LIGHTS	Location ☐ Left ☐ Right ☐ Front ☐ Rear	Failed Part(s) ☐ Original ☐ Replacement
No. of Failure	Dates 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 ☐ Yes ☐ No	Fire ☐ Yes ☐ No	Number of Persons Injured	Number of Fatalities	Estimated Property Damage	Reported to Police ☐ Yes ☐ No
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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 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 335	
 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) DETROIT MI		Date Received 08-MAY-2002 Reference No. 8009420	
Do you authorize NHTSA to provide a copy of report to the manufacturer of your vehicle? In the absence of a signature, name and address to the vehicle manufacturer.		☐ YES ☒ NO Date <u>6/1/02</u>	
VEHICLE INFORMATION			
Vehicle Ident. No. (VIN.) (Located at bottom of windshield on driver's side) 3FDPWF36S74MA1701 NOT AVAILABLE		Vehicle Make FORD TRUCK Vehicle Mode F350 Vehicle Year 2000 Current Odometer Reading	
Purchase Date ☒ New ☐ Used		Dealer's Name <u>Auto Fold, Inc.</u> City <u>Southfield</u> State <u>MI</u> Zip Code <u>48074</u> Engine Siz (CID/CC/L) <u>410</u> No Cylinders <u>16</u>	
Transmission Type ☐ Manual ☒ Automatic		Antilock Brakes ☒ Yes ☐ No Restraint System ☐ 3-Point Belt ☐ Motorbelt ☒ Driverside Airbag ☐ 2-Point Belt ☒ Passengerside Airbag	
☒ Yes ☐ No		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			
Component 09305000 09306000		Part Name(s) LIGHTING: FUSE: TAIL LIGHTS LIGHTING: FUSE: BRAKE LIGHTS	
Location ☐ Left ☐ Right ☐ Front ☐ Rear		Failed Part(s) ☒ Original ☐ Replacement	
No of Failures <u>8</u>		Date(s) of Failure(s) <u>04-APR-2002</u> Mileage at Failure(s) <u>100</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(ies) on the back of this form)			
Crash ☐ Yes ☐ No		Fire ☐ Yes ☐ No	
Number of Persons Injured		Number of Fatalities	
Estimated Property Damage		Reported to Police ☐ 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 INFORMATION. *AK			
CONTINUE ON BACK IF NEEDED			
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Narrative Description of Incident(s), Failure(s), Crash(es), and Injury(ies)

My 1995 Ford Taurus - Oil leak on
 engine - leak in sliding cover over
 engine - complaint to Ford World Headquarters in Dearborn
 Michigan - Problem enclosed to show I
 have paid out money to which Ford charged
 me for warranty problem - Problem was
 never completely solved - Almost impossible to
 get into District Court Dearborn. This has been
 number of complaints to Ford - I request
 a recall on this truck line -
 More information also enclosed -

ATTACH ADDITIONAL SHEETS IF NECESSARY

U.S. 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 78173 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

**VEHICLE
 OWNER'S
 QUESTIONNAIRE**

DOT AUTO SAFETY HOTLINE

TO REPORT VEHICLE SAFETY DEFECTS
 COMPLETE THIS FORM
 OR

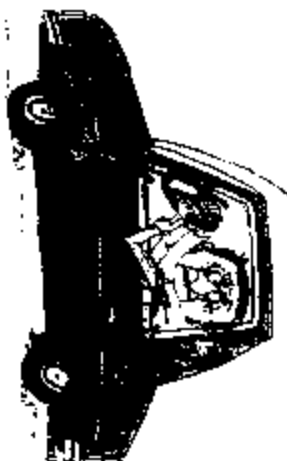
DASH2DOT

and dial toll free at

1-888-DASH-2-DOT

1-888-327-4236

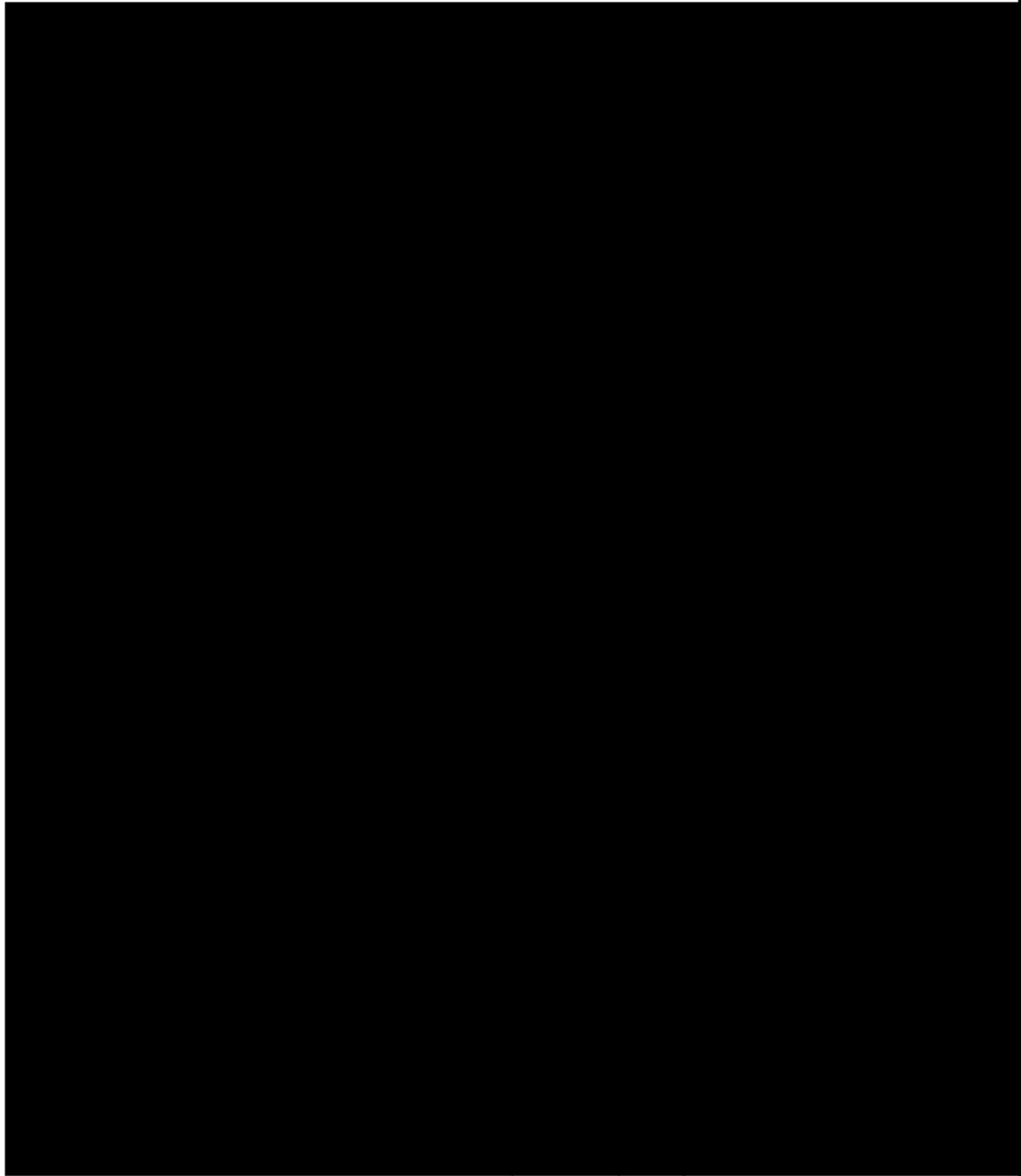
DOT Auto Safety Hotline
 (DASH) 2 DOT

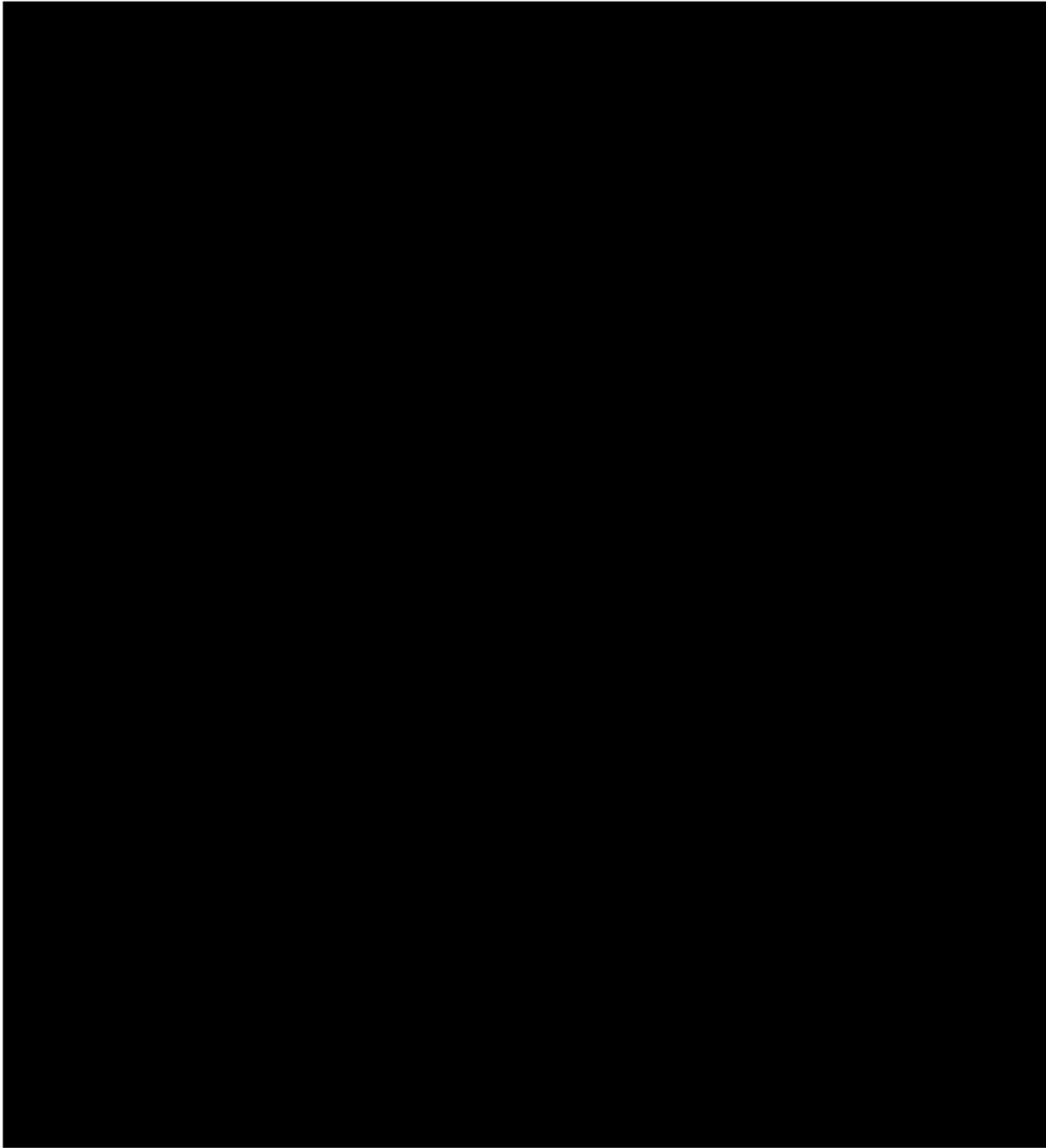


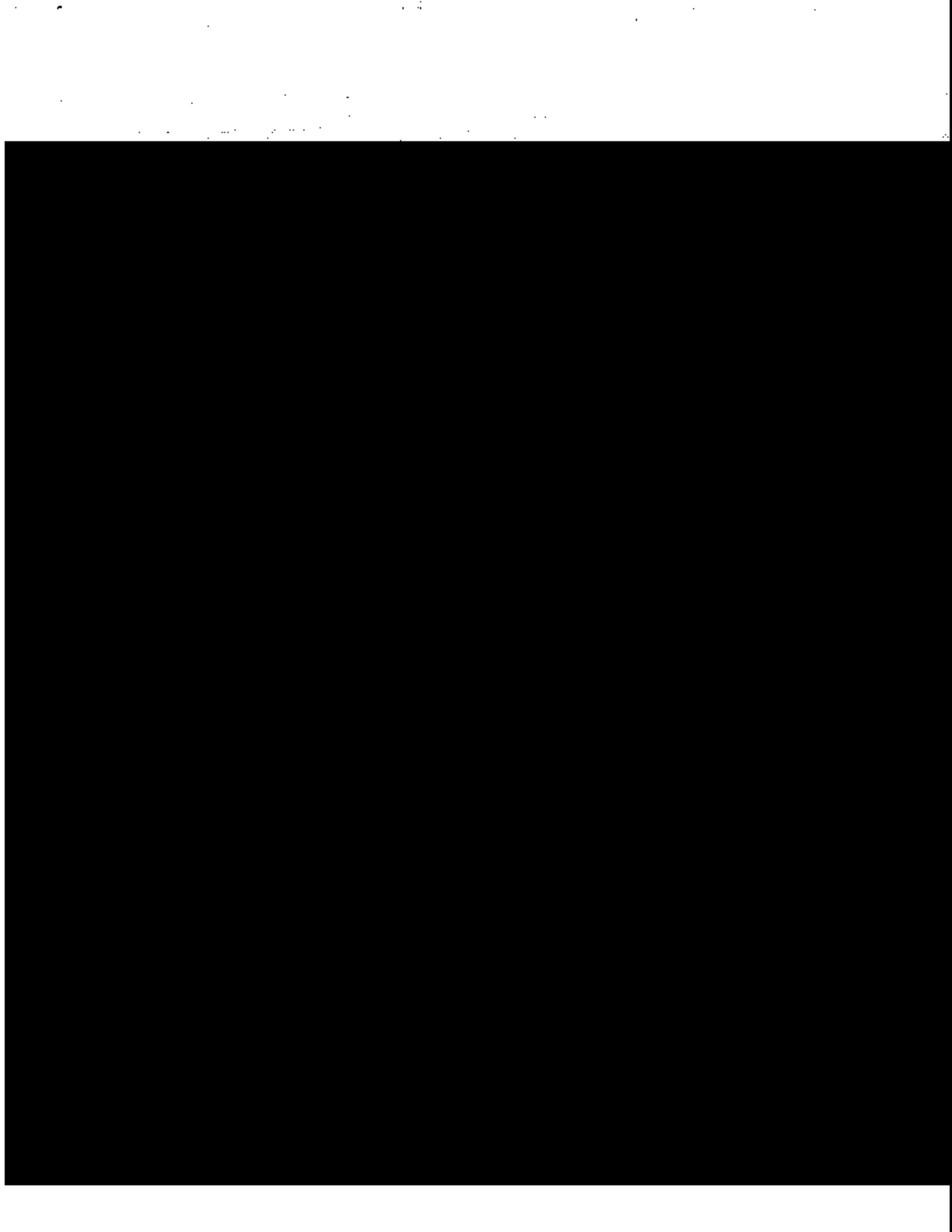
U.S. Department of Transportation
 National Highway Traffic Safety
 Administration
<http://www.nhtsa.dot.gov/hotline>

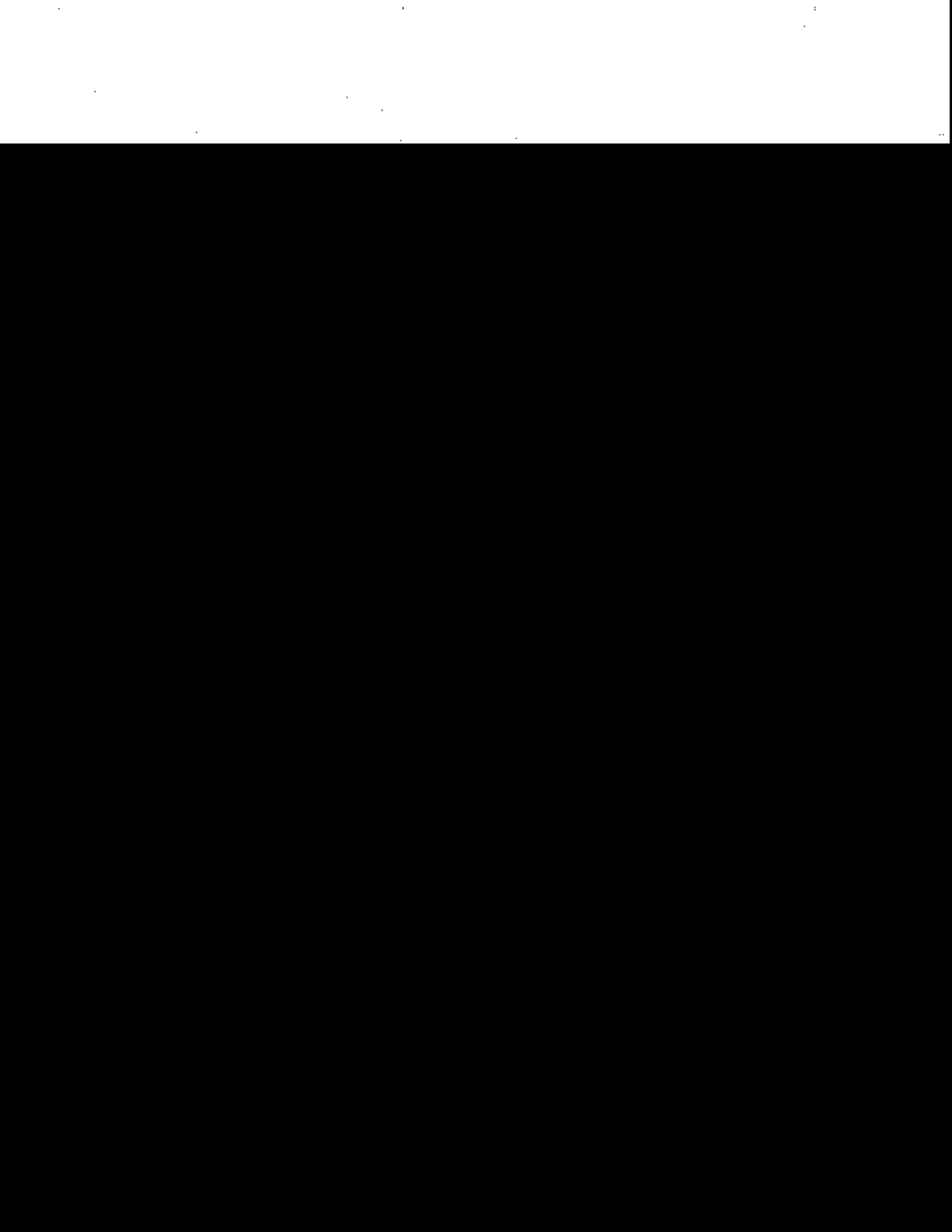
**THE FOLLOWING PAGES ARE WITHHELD TO
PROTECT UNWARRANTED INVASION OF
PERSONAL PRIVACY PURSUANT TO
EXEMPTION 6 OF THE FREEDOM OF
INFORMATION ACT (FOIA), 5 U.S.C. 552(b)(6)**

(Page 1 through Page 17)













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FOR AGENCY USE ONLY 335

Date Received

08-MAY-2002

Od_or

rt_dt

od_rt

up_ltr

Reference No.

8009420

Work Number

Home Number

DETROIT

MI

752884

Do you authorize
In the absence of a

Manufacturer of your vehicle?

☐ YES☒ NO

your name and address to the vehicle manufacturer.

Signature of Owner

Date 6/1/02

VEHICLE INFORMATION

Vehicle Ident. No. (VIN.) (Located at bottom of windshield on driver's side) 3FDPWF36S74MA1201 NOT AVAILABLE	Vehicle Make FORD TRUCK	Vehicle Model F350	Vehicle Year 2000	Current Odometer Reading
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Purchase Date

Dealer's Name

AULT FORD, INC.

Engine Siz

(CID/CC/L 410

No Cylinders 16

☐ Turbo☐ Diesel☒ Gas☐ Fuel Injectio☒ New

City Southfield

State MI

Zip Code 48074

Transmission Type

Antilock Brakes

Restraint System

Cruise Control

Drive Train

Vehicle Type

Body Style

☐ Manual☒ Yes☐ 3-Point Belt☐ Motorbelt☒ Yes☐ Front☐ Sport Ltr☐ 2-Door☒ Automatic☐ No☒ Driverside Airbag☐ 2-Point Bel☐ No☒ Rear☐ Minivan☒ Motorcycle☐ 4-Door☒ Passengerside Airbag☐ 4-Wheel☐ Other☒ Pick Up☐ Truck

FAILED COMPONENT(S)/PART(S) INFORMATION

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

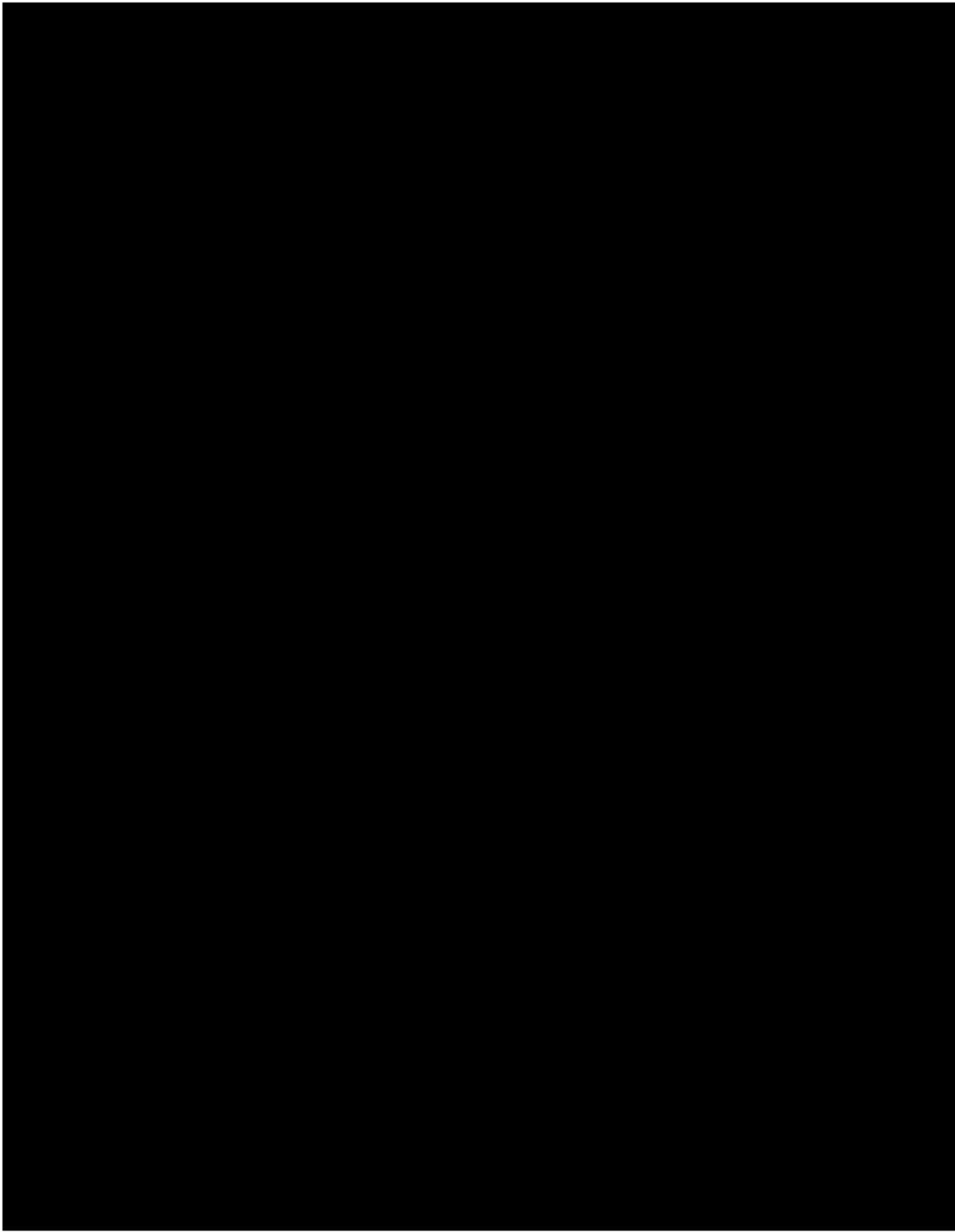
Crash ☐ Yes ☐ No	Fire ☐ Yes ☐ No	Number of Persons Injured	Number of Fatalities	Estimated Property Damage	Reported to Police ☐ Yes ☐ No
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NARRATIVE DESCRIPTION OF FAILURE(S), INCIDENT(S), INJURY(IES)

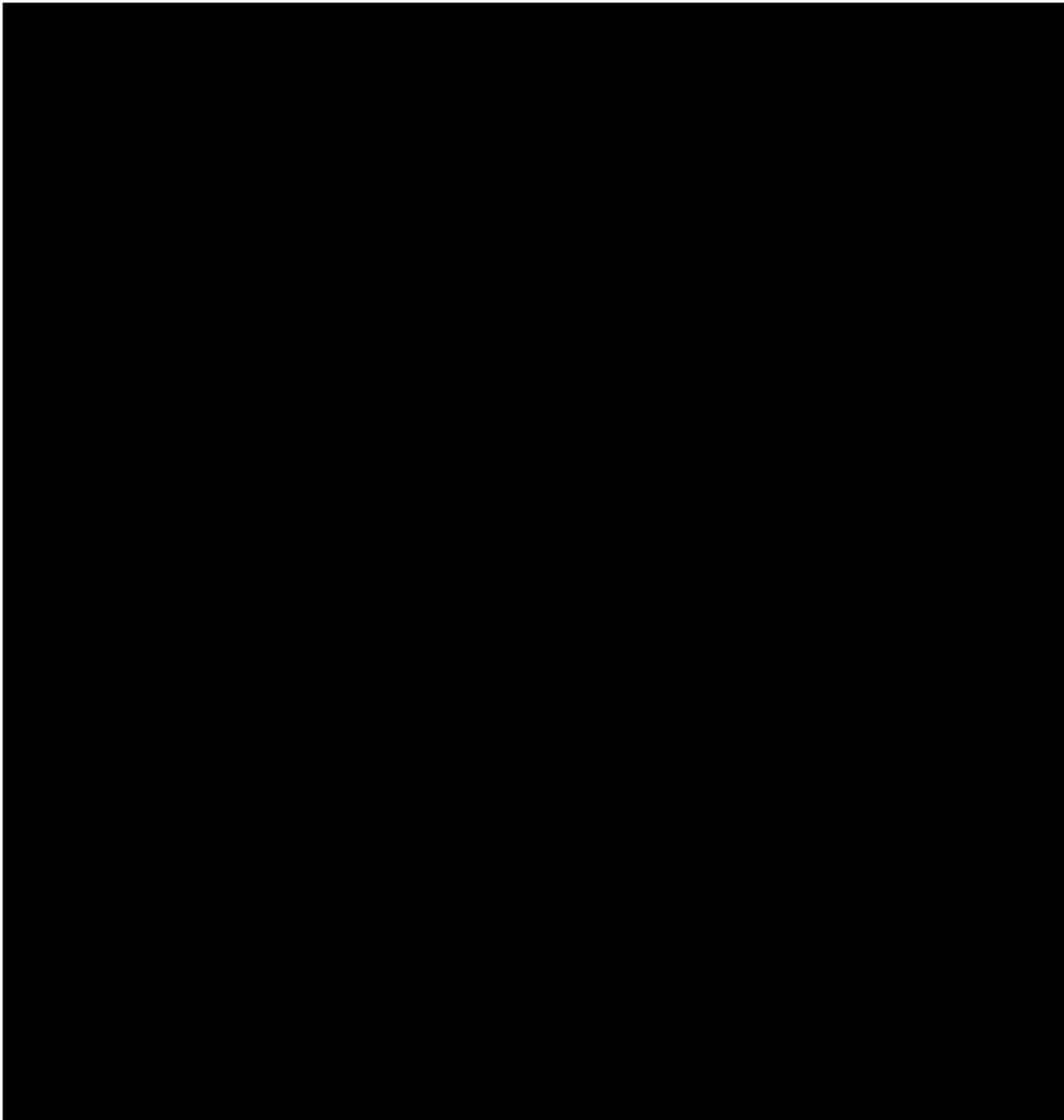
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the 1990s, the number of people in the UK who are aged 65 and over has increased from 10.5 million to 12.5 million, and the number of people aged 75 and over has increased from 4.5 million to 6.5 million (Office for National Statistics 2000). The number of people aged 65 and over is projected to increase to 15.5 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 develop strategies to meet the needs of older people, and to ensure that they are able to live independently and actively in their own homes for as long as possible. This has led to a number of initiatives, including the development of age-friendly communities, and the establishment of local authority services to support older people.

One of the key challenges in developing strategies to meet the needs of older people is to ensure that they are able to live independently and actively in their own homes for as long as possible. This requires a range of services, including housing, health care, and social care.

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RE-MADEMA BAAVE

~~CUSTOMER COPY~~

