



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 758

Date Received

28-JUN-2002

Od_or _____
rt_dt _____
od_rt _____
ip_lr _____

Reference No.

8012872

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
1FDEE14L3VHB67345		FORD TRUCK	E150	1997	
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	☒ Yes ☐ No	☐ Front ☐ Rear ☐ 4-Wheel	☐ Car ☒ Van ☐ Minivan ☐ Other _____
		☐ Motorbelt ☐ 2-Point Bel			☐ Sport Util ☐ Truck ☐ Motorcycle ☐ Other _____
					Body Style
					☐ 2-Door ☐ 4-Door ☐ Stationwagon ☐ Pick Up Truck ☐ Other _____

FAILED COMPONENT(S)/PART(S) INFORMATION

Component 05100000	Part Name(s) ENGINE	Location ☐ Left ☐ Right ☐ Front ☐ Rear	Failed Part(s) ☐ Original ☐ Replacement
No of Failure	Dates of Failure(s) 01-JUN-2002	Failed Part(s) ☐ Yes ☐ No	NHTSA Previously ☐ Yes ☐ No
	Mileage at Failure(s) 50000		
	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 ☐ 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)

VEHICLE IS STALLING WHEN BACKING UP AND COMING TO A STOP. THIS BECAME PROGRESSIVLY WORSE. DEALER CANNOT REMEDY PROBLEM.*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 Vehicle Owner's Questionnaire (VOQ) NATIONWIDE 1-888-DASH-2-DOT 1-888-327-4236 www.nhtsa.dot.gov/hotline		FOR AGENCY USE ONLY 758	
		Date Received: <u>28-JUN-2002</u> OFFICE OF DEFECTS INVESTIGATION	Od or rt_drl _____ od_rt _____ up_ltr _____ Reference No. 8012872
OWNER INFORMATION (Type or Print) [Redacted] 761514 LAKE ORION 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 an [Redacted] provide your name and address to the vehicle manufacturer. Signature of Owner [Redacted] Date <u>7/9/02</u>			
VEHICLE INFORMATION			
Vehicle Ident. No. (VIN) (Located at bottom of instrument panel on driver's side) 1FDEE14L3VHB67345		Vehicle Make FORD TRUCK	Vehicle Model E150
Vehicle Year 1997		Current Odometer Reading 50,928	
Purchase Date ☐ New ☒ Used	Dealer's Name <u>HUNTINGTON FORD</u> <u>Rochester Hills</u> City <u>MI</u> State <u>MI</u> Zip Code <u>48307</u>		Engine Size (CID/GOL) _____ No. Cylinders _____ ☐ Turbo Diesel Gas Fuel Injectio
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 Ult ☐ 2-Door ☒ Van ☐ Truck ☐ 4-Door ☐ Minivan ☐ Motorcycle ☐ Stationwagon ☐ Other _____ ☐ Pick Up ☐ Truck		
FAILED COMPONENT(S)/PART(S) INFORMATION			
Component 051D0000	Part Name(s) ENGINE	Location ☐ Left ☐ Right ☐ Front ☐ Rear	Failed Part(s) ☐ Original ☐ Replacement
No of Failures 5	Date(s) of Failure(s) <u>01-JUN-2002</u> <u>8/30/00</u> <u>9/18/00</u> <u>11/03/00</u> Mileage at Failure(s) <u>50000</u> <u>31,740</u> <u>32,400</u> <u>33,850</u> Vehicle Speed at Failure(s) <u>0-10 MPH</u> <u>19,815</u> <u>6/22/02</u>		Failed Part(s) ☒ Yes ☐ No ☐ 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)			
VEHICLE IS STALLING WHEN BACKING UP AND COMING TO A STOP. THIS BECAME PROGRESSIVLY WORSE. DEALER CANNOT REMEDY PROBLEM.*AK ALSO STALLED WHILE PULLING OUT INTO INCOMING TRAFFIC VEHICLE WAS HOOKED UP TO A MONITORING DEVICE WHICH DETECTED FAULTY EDPFE SENSOR (PROBLEM STILL OCCURS 3 WEEKS LATER) INSTRUCTED TO BRING VEHICLE BACK NEXT WEEK August 19th			
CONTINUE ON BACK IF NEEDED			
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