 DOT Auto Safety Hotline Vehicle Owner's Questionnaire (VOQ) U.S. Department of Transportation National Highway Traffic Safety Administration NATIONALWIDE 1-888-DASH-2-DOT 1-888-327-4238 www.nhtsa.dot.gov/hotline		FOR AGENCY USE ONLY 758 Date Received: <u>15-NOV-2002</u> OFFICE DEFECTS INVESTIGATION Reference No. <u>8022807</u> Work Number <u>NONE</u> Home Number _____	
OWNER INFORMATION (Type or Print) [Redacted] DENMARK WI		Do you authorize NHTSA to provide a copy of report to the manufacturer of your vehicle? in the absence of a written objection, NHTSA will use your name and address to the vehicle manufacturer. <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO Signature of Owner _____ Date <u>12/10/02</u>	
VEHICLE INFORMATION			
Vehicle Ident. No. (VIN) <u>1FTFX28W7VKB58017</u>	Vehicle Make <u>FORD TRUCK</u>	Vehicle Model <u>F250</u>	Vehicle Year <u>1997</u>
Purchase Date <u>9-10-96</u>		Current Odometer Reading <u>108,000</u>	
<input checked="" type="checkbox"/> New <input type="checkbox"/> Used	Dealer's Name <u>Van Bortel Ford</u>	Engine Size (CID/CYL) <u>4.6</u>	<input type="checkbox"/> Turbo Diesel <input checked="" type="checkbox"/> Gas <input type="checkbox"/> Fuel Injection
City/State <u>GREEN BAY WI</u>		Zip Code <u>54307</u>	
Transmission Type <input type="checkbox"/> Manual <input checked="" type="checkbox"/> Automatic	Antilock Brakes <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Restraint System <input checked="" type="checkbox"/> 3-Point Belt <input type="checkbox"/> Motorbelt <input checked="" type="checkbox"/> Driverside Airbag <input type="checkbox"/> 2-Point Belt <input checked="" type="checkbox"/> Passengerside Airbag	Cruise Control <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Drive Train <input type="checkbox"/> Front <input type="checkbox"/> Rear <input checked="" type="checkbox"/> 4-Wheel		Vehicle Type <input type="checkbox"/> Car <input type="checkbox"/> Van <input type="checkbox"/> Minivan <input type="checkbox"/> Other	Body Style <input type="checkbox"/> Sport Ut <input type="checkbox"/> Truck <input type="checkbox"/> Motorcycle <input type="checkbox"/> 2-Door <input type="checkbox"/> 4-Door <input type="checkbox"/> Stationwagon <input checked="" type="checkbox"/> Pick Up Truck <input type="checkbox"/> Other
FAILED COMPONENT(S)/PART(S) INFORMATION			
Component <u>5</u> 05210000	Part Name(s) <u>ENGINE COOLING SYSTEM: RADIATOR</u>	Location <input type="checkbox"/> Left <input checked="" type="checkbox"/> Front <input type="checkbox"/> Right <input type="checkbox"/> Rear	Failed Part(s) <input checked="" type="checkbox"/> Original <input checked="" type="checkbox"/> Replacement
No. of Failures	Date(s) of Failure(s) <u>18-APR-2001, 12-11-01, 11-20-02</u>	Mileage at Failure(s) <u>103000</u>	Vehicle Speed at Failure(s) <u>55</u>
Failed Part(s) Available? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		NHTSA Previously <input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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 <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Fire <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Number of Persons Injured <u>NONE</u>	Number of Fatalities <u>NONE</u>
Estimated Property Damage <u>NONE</u>		Reported to Police <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
NARRATIVE DESCRIPTION OF FAILURE(S), INCIDENT(S), INJURY(IES)			
RADIATOR HAS LEAKED 3 TIMES, DEALER REPAIRED TWICE. THE THIRD TIME THE RADIATOR WAS REPLACED. PLEASE PROVIDE ADDITIONAL INFORMATION. TS <u>Heater Core was replaced on 4-10-01. Heater had another problem with leakage again on 12-11-01. Have had nothing but problems with this truck.</u>			
CONTINUE ON BACK IF NEEDED			
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.			

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

Have had truck in shop 5 times in the last 1 1/2 yrs to have radiator problem fixed. Van Borte put in a new heater core & put in 3 new radiators within the last 1 1/2 yrs. Can't seem to find what the problem is. Spent almost \$3,000.00 in the last year & 1/2. Always has brake dust on front rims of the tires. Always hear the same excuse from Van Borte that brake dust on rims "is normal."

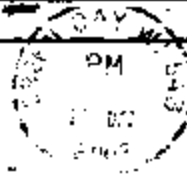
ATTACH ADDITIONAL SHEETS IF NECESSARY

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



NO POSTAGE NECESSARY IF MAILED IN THE UNITED STATES

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



VEHICLE OWNER'S QUESTIONNAIRE

DOT AUTO SAFETY HOTLINE

TO REPORT VEHICLE SAFETY DEFECTS
COMPLETE THIS FORM
OR

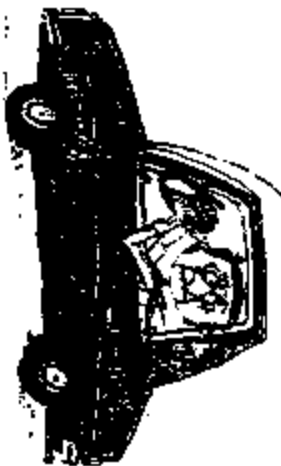
DASH2DOT

and dial toll free at

1-888-DASH-2-DOT

1-888-327-4236

DOT Auto Safety Hotline
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National Highway Traffic Safety Administration
<http://www.nhtsa.dot.gov/hotline>