



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 117

Date Received

10-JAN-2000

Od_or _____
rt_dt _____
od_rt _____
up_ltr _____

Reference No.

854837

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) (located at front of windshield or driver's side) 1FATSW31F1YEA7533	Vehicle Make FORD TRUCK	Vehicle Model F250	Vehicle Year 2000	Current Odometer Reading
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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 ☐ Manual ☐ Automatic	Antilock Brakes ☐ Yes ☒ No	Restraint System ☒ 3-Point Belt ☐ Motorbell ☐ Driverside Airbag ☐ 2-Point Belt ☐ Passengerside Airbag	Cruise Control ☐ Yes ☒ No	Drive Train ☐ Front ☐ Rear ☐ 4-Wheel	Vehicle Type ☐ Car ☐ Sport Ult ☐ Van ☐ Truck ☐ Minivan ☐ Motorcycle ☐ Other _____	Body Style ☐ 2-Door ☐ 4-Door ☐ Stationwagon ☐ Pick Up Truck ☐ Other _____
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FAILED COMPONENT(S)/PART(S) INFORMATION

Component 01100000	Part Name(s) STEERING:WHEEL AND COLUMN	Location ☐ Left ☐ Right ☐ Front ☐ Rear	Failed Part(s) ☐ Original ☐ Replacement
No of Failures	Date(s) of Failure(s) <u>30-NOV-1999</u> Mileage at Failure(s) <u>1</u> Vehicle Speed at Failure(s) _____	Failed Part(s) Available? ☐ Yes ☐ No	NHTSA Previously Contacted? ☐ 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 VEHICLE WOULD PULL TO THE RIGHT IF STEERING WHEEL IS HELD LOOSELY OR NOT AT ALL. SPEED IS NOT A FACTOR. TOOK VEHICLE TO DEALERSHIP & WAS INFORMED BY MECHANIC THE MANUFACTURER KNOWS OF THE PROBLEM, BUT HAS NO CORRECTIVE SOLUTIONS. *AK

CONTINUED ON BACK (117-117)

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.



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OWNER INFORMATION (Type or Print)

583393

Work Number

Home Number

Do you authorize NHTSA to provide a copy of report to the manufacturer of your vehicle?

☒ YES☐ NO

In the absence of an authorized signature, NHTSA will NOT provide your name and address to the vehicle manufacturer.

Signature of Owner

Date 1/16/00

VEHICLE INFORMATION

Vehicle Ident. No. (VIN) (Located at bottom of field on driver's side) 1FTSW31F11EA75333	Vehicle Make FORD TRUCK	Vehicle Model F350	Vehicle Year 2000	Current Odometer Reading
Purchase Date	Dealer's Name Citrus Motors	Engine Size (CID/COI) 7.3	☒ Turbo ☒ Diesel ☐ Gas ☐ Fuel Injection	
☒ New ☐ Used	City ontario State CA Zip Code	No Cylinders 8		
Transmission Type ☐ Manual ☒ Automatic	Antilock Brakes ☒ Yes ☒ No	Restraint System ☒ 3-Point Belt ☐ Motorbelt ☐ Driverside Airbag ☐ 2-Point Belt ☐ Passengerside Airbag	Cruise Control ☒ Yes ☒ No	Drive Train ☐ Front ☐ Rear ☒ 4-Wheel
		Vehicle Type ☐ Car ☐ Sport Utl ☐ Van ☒ Truck ☐ Minivan ☐ Motorcycle ☐ Other		Body Style ☐ 2-Door ☒ 4-Door ☐ Stationwagon ☐ Pick Up Truck ☐ Other

FAILED COMPONENT(S)/PART(S) INFORMATION

Component 61100000	Part Name(s) STEERING WHEEL AND COLUM: Front End.	Location ☒ Left ☒ Right ☒ Front ☐ Rear	Failed Part(s) ☐ Original ☐ Replacement
No of Failures	Date(s) of Failure(s) 30-NOV-1999 Mileage at Failure(s) 1 Vehicle Speed at Failure(s) any speed	Failed Part(s) Available? ☐ Yes ☐ No	NHTSA Previously Contacted? ☐ 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)

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