



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 294

Data Received

29-MAR-2000

Od_or _____
rt_dt _____
od_rt _____
up_ltr _____

Reference No.

859367

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) _____ <small>(Listed at front of windshield or drivers side)</small>	Vehicle Make FORD	Vehicle Model TAURUS	Vehicle Year 1998	Current Odometer Reading
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Purchase Date	Dealer's Name _____	Engine Size (CID/CC/L) _____	<input type="checkbox"/> Turbo <input type="checkbox"/> Diesel <input type="checkbox"/> Gas <input type="checkbox"/> Fuel Injection
<input checked="" type="checkbox"/> New <input type="checkbox"/> Used	City _____ State _____ Zip Code _____	No. Cylinders _____	

Transmission Type <input type="checkbox"/> Manual <input type="checkbox"/> Automatic	Antilock Brakes <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Restraint System <input type="checkbox"/> 3-Point Belt <input type="checkbox"/> Motorbell <input type="checkbox"/> Driverside Airbag <input type="checkbox"/> 2-Point Belt <input type="checkbox"/> Passengerside Airbag	Cruise Control <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Drive Train <input type="checkbox"/> Front <input type="checkbox"/> Rear <input type="checkbox"/> 4-Wheel	Vehicle Type <input type="checkbox"/> Car <input type="checkbox"/> Sport Ult <input type="checkbox"/> Van <input type="checkbox"/> Truck <input type="checkbox"/> Minivan <input type="checkbox"/> Motorcycle <input type="checkbox"/> Other _____	Body Style <input type="checkbox"/> 2-Door <input type="checkbox"/> 4-Door <input type="checkbox"/> Stationwagon <input type="checkbox"/> Pick Up Truck <input type="checkbox"/> Other _____
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FAILED COMPONENT(S)/PART(S) INFORMATION

Component 06420000	Part Name(s) FUEL:THROTTLE LINKAGES:ACCELERATOR:RIGID	Location <input type="checkbox"/> Left <input type="checkbox"/> Right <input type="checkbox"/> Front <input type="checkbox"/> Rear	Failed Part(s) <input type="checkbox"/> Original <input type="checkbox"/> Replacement
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No. of Failures	Date(s) of Failure(s) <u>28-MAR-2000</u> Mileage at Failure(s) <u>31</u> Vehicle Speed at Failure(s) _____	Failed Part(s) Available? <input type="checkbox"/> Yes <input type="checkbox"/> No	NHTSA Previously Contacted? <input type="checkbox"/> Yes <input type="checkbox"/> No
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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	Number of Fatalities	Estimated Property Damage	Reported to Police <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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NARRATIVE DESCRIPTION OF FAILURE(S), INCIDENT(S), INJURY(IES)

INTERMITTENTLY WHILE THE BRAKES ARE APPLIED VEHICLE VEHICLE SUDDENLY AND UNEXPECTEDLY ACCELERATES. DEALER IS INSPECTING THE VEHICLE. *AK

CONTINUED ON BACK (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 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		FOR AGENCY USE ONLY 284 Date Received 09 APR 14 AM 10:29 29-MAR-2000 OFFICE DEFECTS INVESTIGATION	
OWNER INFORMATION (Type or Print) [Redacted] 599566				Reference No. 859367	
Do you authorize NHTSA to provide a copy of report to the manufacturer of your vehicle? In the absence of [Redacted] name and address to the vehicle manufacturer.				<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	
Signature of Owner <u>[Signature]</u>				Date <u>4/6/00</u>	
VEHICLE INFORMATION					
Vehicle Ident. No. (VIN) (located at bottom of windshield on driver's side) <u>1FAPP52UOWA192892</u>		Vehicle Make <u>FORD</u>	Vehicle Model <u>TAURUS</u>	Vehicle Year <u>1998</u>	Current Odometer Reading
Purchase Date <input checked="" type="checkbox"/> New <input type="checkbox"/> Used		Dealer's Name <u>Wayne Akers</u> <u>Orlando Worth</u> State <u>FL</u> Zip Code _____		Engine Size (CID/CC/IL) <u>3.0L</u> No. Cylinders <u>6</u>	
<input checked="" type="checkbox"/> Turbo <input type="checkbox"/> Diesel <input checked="" type="checkbox"/> Gas <input type="checkbox"/> Fuel Injection		Transmission Type <input type="checkbox"/> Manual <input checked="" type="checkbox"/> Automatic	Antilock Brakes <input type="checkbox"/> Yes <input checked="" 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 checked="" type="checkbox"/> Front <input type="checkbox"/> Rear <input type="checkbox"/> 4-Wheel	Vehicle Type <input checked="" type="checkbox"/> Car <input type="checkbox"/> Van <input type="checkbox"/> Minivan <input type="checkbox"/> Other	<input type="checkbox"/> Sport UT <input type="checkbox"/> Truck <input type="checkbox"/> Motorcycle	Body Style <input type="checkbox"/> 2-Door <input type="checkbox"/> 4-Door <input type="checkbox"/> Stationwagon <input type="checkbox"/> Pick Up Truck <input type="checkbox"/> Other		
FAILED COMPONENT(S)/PART(S) INFORMATION					
Component <u>08420000</u>	Part Name(s) <u>FUEL THROTTLE LINKAGES ACCELERATOR RIGID</u>		Location <input type="checkbox"/> Left <input type="checkbox"/> Right <input type="checkbox"/> Front <input type="checkbox"/> Rear		Failed Part(s) <input type="checkbox"/> Original <input type="checkbox"/> Replacement
No of Failures <u>3</u>	Date(s) of Failure(s) <u>29-MAR-2000</u> Mileage at Failure(s) <u>31 M</u> Vehicle Speed at Failure(s) <u>0</u>		Failed Part(s) Available? <input type="checkbox"/> Yes <input type="checkbox"/> No	NHTSA Previously Contacted? <input type="checkbox"/> Yes <input 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>0</u>	Number of Fatalities <u>0</u>	Estimated Property Damage <u>0</u>	Reported to Police <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
NARRATIVE DESCRIPTION OF FAILURE(S), INCIDENT(S), INJURY(IES)					
INTERMITTENTLY WHILE THE BRAKES ARE APPLIED VEHICLE SUDDENLY AND UNEXPECTEDLY ACCELERATES. DEALER IS INSPECTING THE VEHICLE. *AK above statement not an accurate description. Without warning, while at a stop in traffic, with car in drive and foot on brake - car had 3 times in 30+ miles started jerk race. Only alertness of driver in turning key off and firmly applying brakes avoided serious heavy traffic accident. The papers enclosed indicate the concern and willingness of the Dealer to find and correct.					
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.					

CONTINUE ON BACK IF NEEDED

60439

167952

Now You're Talking...

WAYNE AKERS

10TH AVENUE NORTH & I-95 LAKE WORTH, FL 33481
TELEPHONE 582-4444
PLEASE CALL FOR AN APPOINTMENT

INVOICE

PAGE 1

SERVICE ADVISOR: 6833 OSWALDO CASSASQUILL

LT. PRAIRI 98	FORD TAURUS	1FAFP52U0WA182892	31325/31365	T389P
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DEL DATE	PROD DATE	WARR EXP	PROMISED	PO NO	RATE	PAYMENT	INV DATE
11AUG1998			17:30 28MAR00			CASH	29MAR2000

R.O. OPENED	READY	OPTIONS:	STK:182892 DLR:24B216 ENG:3.0L_EFI_V6				
10:09 28MAR00	14:30 28MAR00	TRN:AUTO_O/D_TRANS					

LINE	OPCODE	TECH	TYPE	HOURS	LIST	NET	TOTAL
------	--------	------	------	-------	------	-----	-------

A D41CUST STATES IDLE PLACES BY ITSELF AT STOPS IN DRIVE; ALSO STAYS VERY HIGH MOST OF TIME; HOT ENGINE
 CAUSE: 31335 DIAGS W-2228 KOEO TEST(PASS-PASS), KOER TEST(PASS), FUEL PRESSURE TEST, IGNITION SYSTEM TEST, RECORDER- MONITOR TEST, ROAD TEST, NOR
 12650D EEC - (QUICK TEST) - DIAGNOSIS 2228 W98 0.20 (N/C)
 12650D55 IGNITION SYSTEM - DIAGNOSIS 2228 W98 0.40 (N/C)
 12650D81 NGS RECORDER / MONITOR ROAD TEST - DIAGNOSIS 2228 W98 0.50 (N/C)
 9350B FUEL PUMP PRESSURE TEST ON VEHICLE (9H307/9A407/9350) - DIAGNOSIS 2228 W98 0.40 (N/C)

FC: D41 42
 PART#: DIAG
 COUNT:
 CLAIM TYPE:
 AUTH CODE:
 2228

PARTS: 0.00 LABOR: 0.00 OTHER: 0.00 TOTAL LINE A: 0.00

31365 DIAGS W-2228 KOEO TEST(PASS-PASS), KOER TEST(PASS), FUEL PRESSURE TEST, IGNITION SYSTEM TEST, RECORDER/ MONITOR TEST, ROAD TEST, NORMAL A/C CYCLING ON AND OFF. 12650D,D55,D81,9350E. Q.C. MGR TEST DROVE 30 MILES UNABLE TO VERIFY CUSTOMER CONCERN AT THIS TIME. NO HIGH IDLE ALL OK AT THIS TIME

B PERFORM MULTI POINT INSPECTION
 99P PERFORM MULTI POINT INSPECTION 2228 C 0.20 0.00 0.00
 BK6 6MM BRAKE LINING REMAINING. 2 C 0.20 0.00 0.00

ON BEHALF OF SERVICING DEALER, I HEREBY CERTIFY THAT THE INFORMATION CONTAINED HEREON IS ACCURATE UNLESS OTHERWISE SHOWN. SERVICES DESCRIBED WERE PERFORMED AT NO CHARGE TO OWNER. THERE WAS NO INDICATION FROM THE APPEARANCE OF THE VEHICLE OR OTHERWISE, THAT ANY PART REPAIRED OR REPLACED UNDER THIS CLAIM HAD BEEN CONNECTED IN ANY WAY WITH ANY ACCIDENT, NEGLIGENCE OR MISUSE. RECORDS SUPPORTING THIS CLAIM ARE AVAILABLE FOR 111 YEAR FROM THE DATE OF PAYMENT NOTIFICATION AT THE SERVICING DEALER FOR INSPECTION BY MANUFACTURER'S REPRESENTATIVE.

LIMITED WARRANTY: The only warranties applying to the parts installed in accordance with this invoice are those that may be offered by the manufacturer. The seller hereby expressly disclaims all warranties, either express or implied, including any implied warranty of merchantability or fitness for a particular purpose, and neither we nor our authorized any other person to assume for it any liability in connection with the sale of products or service sold under the terms of this invoice and of repair order. Parts and labor guaranteed for 12 months or 2,000 miles whichever comes first. Seller does not guarantee that the work performed in accordance with this invoice will correct any problem specified on the description of the complaint. If a title used on part # is RM, then this is a re-manufactured or used part.

CUSTOMER HEREBY ACKNOWLEDGES RECEIPT OF ABOVE MENTIONED VEHICLE, AND RECEIPT OF RVO OR COPY HEREOF.

DESCRIPTION	TOTALS
LABOR AMOUNT	
PARTS AMOUNT	
GAS, OIL, LUBE	
SUBLET AMOUNT	
MISC. CHARGES	
TOTAL CHARGES	
LESS INSURANCE	
SALES TAX	
PLEASE PAY THIS AMOUNT	

X (SIGNED): DEALER, GENERAL MANAGER OR AUTHORIZED PERSON **X** CUSTOMER SIGNATURE (DATE)

CUSTOMER COPY

60439

16795 *Now You're Talking...*

WAYNE AKERS

10TH AVENUE NORTH & I-95 LAKE WORTH, FL 33461
TELEPHONE 582-4444
PLEASE CALL FOR AN APPOINTMENT

INVOICE

PAGE 2

SERVICE ADVISOR: 6833 OSWALDO CASSASQUILLA

COLOR	YEAR	MAKE/MODEL	VIN	LICENSE	MILEAGE IN/ OUT	TAG	
LT. PRAIRI	98	FORD TAURUS	1FAFP52U0WA182892		31325/31365	T389P	
DEL DATE	PRDD. DATE	WARR. EXP.	PROMISED	PO NO.	RATE	PAYMENT	INV. DATE
11AUG1998			17:30 28MAR00			CASH	29MAR2000
R.O. OPENED.	READY	OPTIONS: STK:182892 DLR:24B216 ENG:3.0L_EFI_V6					
10:09 28MAR00	14:30 28MAR00	TRN:AUTO_O/D_TRANS					

LINE	OPCODE	TECH	TYPE	HOURS	LIST	NET	TOTAL
TIRES TREAD DEPTH 8/32 OF AN INCH.							
			2	C	0.00		0.00
PARTS:			0.00	LABOR:	0.00	OTHER:	0.00
						TOTAL LINE B:	0.00

31325 CP 0.2-2238 MPI.

 ***** IF YOU ARE NOT COMPLETELY SATISFIED *****
 ***** WITH THE SERVICING OF YOUR VEHICLE *****
 ***** PLEASE CALL US AT 561-540-9667 *****
 ***** WAYNE AKERS FORD *****
 ***** THANKS YOU FOR YOUR PATRONAGE! *****

ON BEHALF OF SERVICING DEALER, I HEREBY CERTIFY THAT THE INFORMATION CONTAINED HEREON IS ACCURATE UNLESS OTHERWISE SHOWN. SERVICES DESCRIBED WERE PERFORMED AT NO CHARGE TO OWNER. THERE WAS NO INDICATION FROM THE APPEARANCE OF THE VEHICLE OR OTHERWISE, THAT ANY PART REPAIRED OR REPLACED UNDER THIS CLAIM HAD BEEN CONNECTED IN ANY WAY WITH ANY ACCIDENT, NEGLIGENCE OR MISUSE. RECORDS SUPPORTING THIS CLAIM ARE AVAILABLE FOR (1) YEAR FROM THE DATE OF PAYMENT NOTIFICATION AT THE SERVICING DEALER FOR INSPECTION BY MANUFACTURER'S REPRESENTATIVE.

LIMITED WARRANTY: The only warranty applying to the vehicle included in accordance with this estimate are those that may be offered by the manufacturer. The seller hereby expressly disclaims all warranties, either express or implied, including any implied warranty of merchantability or fitness for a particular purpose, and will not assume any liability in connection with the sale of products or services sold under the terms of this estimate and repair order. Parts and labor guaranteed for 12 months or 12,000 miles, whichever comes first. Seller does not guarantee the work performed in accordance with this estimate will correct any problem described in the description of the complaint, if sufficient on part # is RM, then this is a remanufactured or used part.

CUSTOMER HEREBY ACKNOWLEDGES RECEIPT OF ABOVE MENTIONED VEHICLE, AND RECEIPT OF INVOICE COPY HEREOF


DESCRIPTION	TOTALS
LABOR AMOUNT	0.00
PARTS AMOUNT	0.00
GAS, OIL, LUBE	0.00
SUBLET AMOUNT	0.00
MISC. CHARGES	0.00
TOTAL CHARGES	0.00
LESS INSURANCE	0.00
SALES TAX	0.00
PLEASE PAY THIS AMOUNT	0.00

X (SIGNED) DEALER, GENERAL MANAGER OR AUTHORIZED PERSON

X CUSTOMER SIGNATURE (DATE)

CUSTOMER COPY

Previous report

 <p>U.S. Department of Transportation National Highway Traffic Safety Administration</p>	<p>DOT Auto Safety Hotline</p> <p>Vehicle Owner's Questionnaire (VOQ)</p> <p>NATIONWIDE 1-888-DASH-2-DOT 1-888-327-4236 www.nhtsa.dot.gov/hotline</p>		<p>FOR AGENCY USE ONLY 284</p>	
	<p>OWNER INFORMATION (Type or Print)</p> <p>[Redacted] 599566</p>		<p>Date Received FEB 23 11 40 AM '00 29-MAR-2000</p>	<p>Od or rt, dt od_rt up_ltr</p>
<p>Do you authorize NHTSA to provide a copy of report to the manufacturer of your vehicle? In the absence of an address, please provide name and address to the vehicle manufacturer.</p>		<p><input checked="" type="checkbox"/> YES <input type="checkbox"/> NO</p>		
<p>Signature of Owner [Redacted]</p>		<p>Date 4/6/00</p>		

VEHICLE INFORMATION						
Vehicle Ident. No. (VIN) <i>1FAFP52U0WA182892</i>	Vehicle Make FORD	Vehicle Model TAURUS	Vehicle Year 1998	Current Odometer Reading		
Purchase Date	Dealer's Name <i>Wayne Akers</i>		Engine Size (CID/CCL) <i>3.0L</i>	<input type="checkbox"/> Turbo <input type="checkbox"/> Diesel <input checked="" type="checkbox"/> Gas <input type="checkbox"/> Fuel Injection		
<input checked="" type="checkbox"/> New <input type="checkbox"/> Used	City <i>Lake Worth</i> State <i>FL</i> Zip Code	No Cylinders <i>6</i>				
Transmission Type <input type="checkbox"/> Manual <input checked="" type="checkbox"/> Automatic	Antilock Brakes <input type="checkbox"/> Yes <input checked="" 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 checked="" type="checkbox"/> Front <input type="checkbox"/> Rear <input type="checkbox"/> 4-Wheel	Vehicle Type <input checked="" type="checkbox"/> Car <input type="checkbox"/> Van <input type="checkbox"/> Minivan <input type="checkbox"/> Other	Body Style <input type="checkbox"/> 2-Door <input type="checkbox"/> 4-Door <input type="checkbox"/> Stationwagon <input type="checkbox"/> Pick Up Truck <input type="checkbox"/> Other

FAILED COMPONENT(S)/PART(S) INFORMATION			
Component 06420000	Part Name(s) FUEL THROTTLE LINKAGES ACCELERATOR RIGID	Location <input type="checkbox"/> Left <input type="checkbox"/> Right <input type="checkbox"/> Front <input type="checkbox"/> Rear	Failed Part(s) <input type="checkbox"/> Original <input type="checkbox"/> Replacement
No of Failures 3	Date(s) of Failure(s) <i>28-MAR-2000</i> Mileage at Failure(s) <i>31 M</i> Vehicle Speed at Failure(s) <i>0</i>	Failed Part(s) Available? <input type="checkbox"/> Yes <input type="checkbox"/> No	NHTSA Previously Contacted? <input type="checkbox"/> Yes <input 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 <i>0</i>	Number of Fatalities <i>0</i>	Estimated Property Damage <i>0</i>	Reported to Police <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

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

INTERMITTENTLY WHILE THE BRAKES ARE APPLIED VEHICLE SUDDENLY AND UNEXPECTEDLY ACCELERATES. DEALER IS INSPECTING THE VEHICLE. *AK above statement not an accurate description, without warning, while at a stop in traffic, with car in drive and foot on brakes - car had 3 times in 30+ miles started jerk race. Only alertness of driver in turning key off and jerking applying brakes avoided serious, heavy traffic accident. The paper indeed indicate the concern and willingness of the Dealer to find and correct.

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The whole thing is an invasion of responsibility to the consumer. The problem is clearly to the owner if they are in a tight traffic pattern and could quite probably rectify with a replacement of accelerator chips or components.

