

U.S. Department
of TransportationNational 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 156

Date Received

05-APR-2000

Oid_or _____
rt_dt _____
od_rt _____
up_ltr _____

Reference No.

859757

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 driver's side)</small>	Vehicle Make	Vehicle Model	Vehicle Year	Current Odometer Reading
1FALP52U6SG250199	FORD	TAURUS	1995	

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	Antilock Brakes	Restraint System	Cruise Control	Drive Train	Vehicle Type	Body Style
<input type="checkbox"/> Manual <input type="checkbox"/> Automatic	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> 3-Point Belt <input type="checkbox"/> Driverside Airbag <input type="checkbox"/> Passengerside Airbag <input type="checkbox"/> Motorbell <input type="checkbox"/> 2-Point Belt	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Front <input type="checkbox"/> Rear <input type="checkbox"/> 4-Wheel	<input type="checkbox"/> Car <input type="checkbox"/> Van <input type="checkbox"/> Minivan <input type="checkbox"/> Other _____ <input type="checkbox"/> Sport Ult <input type="checkbox"/> Truck <input type="checkbox"/> Motorcycle	<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 12430000	Part Name(s) INTERIOR SYSTEMS:INSTRUMENT PANEL:SPEEDOMETER:ODOME	Location <input type="checkbox"/> Left <input type="checkbox"/> Right <input type="checkbox"/> Frnt <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) 04-APR-2000 Mileage at Failure(s) 42 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)

THE SPEEDOMETER NEEDLE WOOBLES UP AND DOWN WHICH CANNOT GIVE A CORRECT READING.
PLEASE PROVIDE FURTHER INFORMATION. *AK

CONTINUED ON BACK PLEASE

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.

 U.S. Department of Transportation National Highway Traffic Safety Administration		DOT Auto Safety Hotline 1-888-DASH-2-DOT 1-888-327-4236 www.nhtsa.dot.gov/dotline	
Vehicle Owner's Questionnaire (VOQ) DEPT'S INVESTIGATION DATE RECEIVED: MAY - 2 4 10 2000 OFFICE: 05-APR-2000 REFERENCE NO.: 859757		601264 WORK N HOME N	
Do you authorize NHTSA to provide a copy of report to the manufacturer of your vehicle? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO In the absence of an authorized signature, you are responsible for providing the manufacturer's name and address to the vehicle manufacturer.			
Signature of Owner: _____ Date: 4/19/00			
VEHICLE IDENT. NO. (VIN) (located at bottom of windshield on driver's side) 1FALP52U65G250199			
Vehicle Make: FORD		Vehicle Model: TAURUS	
Vehicle Year: 1996		Current Odometer Reading: 44,100	
Purchase Date: _____ Dealer's Name: MATWAY FORD City: Brownsville State: PA Zip Code: 15417			
Transmission Type: <input checked="" type="checkbox"/> Manual <input type="checkbox"/> Automatic		Restraint System: <input checked="" type="checkbox"/> 3-Point Belt <input type="checkbox"/> Driver's Side Airbag <input type="checkbox"/> Passenger's Side Airbag	
Antilock Brakes: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		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 checked="" type="checkbox"/> 2-Door <input type="checkbox"/> 4-Door <input type="checkbox"/> Station Wagon <input type="checkbox"/> Pick Up Truck <input type="checkbox"/> Other		Fuel Injection: <input checked="" type="checkbox"/> Gas <input type="checkbox"/> Diesel <input type="checkbox"/> Turbo	
FAILED COMPONENT(S)/PART(S) INFORMATION			
Component: 12439600 Part Name(s): INTERIOR SYSTEMS:INSTRUMENT PANEL:SPEEDOMETER:ODOM		Location: <input type="checkbox"/> Front <input type="checkbox"/> Left <input type="checkbox"/> Right <input type="checkbox"/> Rear	
No. of Failures: _____ Date(s) of Failure(s): 04 APR 2000 Mileage at Failure(s): 42,800 Vehicle Speed at Failure(s): 50-65 MPH		Failed Part(s): <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Available? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No NHTSA Previously Contacted? <input checked="" 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: _____		Number of Fatalities: _____	
Estimated Property Damage: _____		Reported to Police: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
NARRATIVE DESCRIPTION OF FAILURE(S), INCIDENT(S), INJURY(IES)			
THE SPEEDOMETER NEEDLE WOBBLES UP AND DOWN WHICH CANNOT GIVE A CORRECT READING. PLEASE PROVIDE FURTHER INFORMATION. *AK - This is dangerous as you could tell the speed you are actually traveling. Many of these have failed on 1995 Ford Taurus and Ford will not fix them. Ford's price to fix speedometer is \$1,100 which is expensive.			
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.			