

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 558

Date Received

26-JUN-2000

 Od_or _____
 Rt_dt _____
 Od_rt _____
 Up_ltr _____

Reference No.

864262

 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)		Vehicle Make	Vehicle Model	Vehicle Year	Current Odometer Reading
1FAPP13P1XW218143		FORD	ESCORT	1999	
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
☐ Manual ☐ Automatic	☐ Yes ☒ No	☐ 3-Point Belt ☐ Driverside Airbag ☐ Passengerside Airbag ☐ Motorbell ☒ 2-Point Belt		☐ Yes ☒ No	☐ Front ☐ Rear ☐ 4-Wheel
Vehicle Type		Body Style			
☐ Car ☐ Van ☐ Minivan ☐ Other _____		☐ Sport Ult ☐ Truck ☐ Motorcycle ☐ 2-Door ☐ 4-Door ☐ Stationwagon ☐ Pick Up Truck ☐ Other _____			

FAILED COMPONENT(S)/PART(S) INFORMATION

Component 08510000 12111000	Part Name(s) ELECTRICAL SYSTEM:IGNITION:SWITCH INTERIOR SYSTEMS:PASSENGER RESTRAINTS:AIR BAG:FRONTA	Location ☐ Left ☐ Right ☐ Front ☐ Rear	Failed Part(s) ☐ Original ☐ Replacement
No of Failures 0	Date(s) of Failure(s) 20-JUN-2000 Mileage at Failure(s) 10000 Vehicle Speed at Failure(s) 0	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 0	Number of Fatalities 0	Estimated Property Damage	Reported to Police ☐ Yes ☒ No
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NARRATIVE DESCRIPTION OF FAILURE(S), INCIDENT(S), INJURY(IES)

IN THE PROCESS OF STARTING VEHICLE IGNITION SWITCH CAUGHT ON FIRE. AS A RESULT, BOTH AIRBAGS DEPLOYED, AND INTERIOR OF DASHBOARD WAS RUINED.*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.



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Order

Product
up to

Reference No.

864262

OWNER INFORMATION (Type or Print)

017

Work Number

Home Number

☐ YES ☐ NO

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

Signature of Owner

VEHICLE INFORMATION

Vehicle Ident. No. (VIN) (Located at bottom of windshield on driver's side)

1FAFP13P1XW21B143

Vehicle Make

FORD

Vehicle Model

ESCORT

Vehicle Year

1999

Current Odometer Reading

Purchase Date

Dealer's Name

☐ New ☒ Used

City State Zip Code

Engine Size
(CID/CC/L)

No Cylinders

☐ Turbo
☐ Diesel
☐ Gas
☐ Fuel Injection

Transmission Type

☐ Manual
☐ Automatic

Antilock Brakes

☐ Yes
☒ No

Restraint System

☐ 3-Point Belt
☐ Driverside Airbag
☐ Passengerside Airbag
☐ Motorbelt
☒ 2-Point Belt

Cruise Control

☐ Yes
☒ No

Drive Train

☐ Front
☐ Rear
☐ 4-Wheel

Vehicle Type

☐ Car
☐ Van
☐ Minivan
☐ Other
☐ Sport Util
☐ Truck
☐ Motorcycle

Body Style

☐ 2-Door
☐ 4-Door
☐ Stationwagon
☐ Pick Up Truck
☐ Other

FAILED COMPONENT(S)/PART(S) INFORMATION

Component
08510000
12111000

Part Name(s)

ELECTRICAL SYSTEM:IGNITION:SWITCH
INTERIOR SYSTEMS:PASSENGER RESTRAINTS:AIR BAG:FRONT

Location

☐ Left ☐ Right
☐ Front ☐ Rear

Failed Part(s)

☐ Original
☐ Replacement

No of Failures

0

Date(s) of Failure(s) 20-JUN-2000

Mileage at Failure(s) 18000

Vehicle Speed at Failure(s) 0

Failed Part(s)
Available?☐ Yes ☐ NoNHTSA 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

0

Number of Fatalities

0

Estimated Property Damage

Reported to Police

☐ Yes ☒ No

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CONTINUE ON BACK IF NEEDED

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