

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

436

Date Received

16-AUG-2000

 Od\_or \_\_\_\_\_  
 Rt\_dt \_\_\_\_\_  
 Od\_rt \_\_\_\_\_  
 Up\_ltr \_\_\_\_\_

Reference No.

867945

 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.)<br><small>(located at front of windshield or driver's side)</small> | Vehicle Make | Vehicle Model | Vehicle Year | Current Odometer Reading |
| NOT AVAILABLE                                                                                 | FIRESTONE    | FIREHAWK      | 1900         |                          |

|                                                                       |                                       |                                 |                                                                                                                                              |
|-----------------------------------------------------------------------|---------------------------------------|---------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------|
| Purchase Date                                                         | Dealer's Name _____                   | Engine Size<br>(CID/CC/L) _____ | <input type="checkbox"/> Turbo<br><input type="checkbox"/> Diesel<br><input type="checkbox"/> Gas<br><input type="checkbox"/> Fuel Injection |
| <input type="checkbox"/> New <input checked="" type="checkbox"/> Used | City _____ State _____ Zip Code _____ | No. Cylinders _____             |                                                                                                                                              |

|                                                                                                    |                                                                                                   |                                                                                                                                                                                                                                             |                                                                                                  |                                                                                                                        |                                                                                                                                                              |                                                                                                                                                                                                                                                                                                                                |
|----------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Transmission Type<br><br><input type="checkbox"/> Manual<br><br><input type="checkbox"/> Automatic | Antilock Brakes<br><br><input type="checkbox"/> Yes<br><br><input checked="" type="checkbox"/> No | Restraint System<br><br><input type="checkbox"/> 3-Point Belt<br><input type="checkbox"/> Driverside Airbag<br><input type="checkbox"/> Passengerside Airbag<br><input type="checkbox"/> Motorbelt<br><input type="checkbox"/> 2-Point Belt | Cruise Control<br><br><input type="checkbox"/> Yes<br><br><input checked="" type="checkbox"/> No | Drive Train<br><br><input type="checkbox"/> Front<br><input type="checkbox"/> Rear<br><input type="checkbox"/> 4-Wheel | Vehicle Type<br><br><input type="checkbox"/> Car<br><input type="checkbox"/> Van<br><input type="checkbox"/> Minivan<br><input type="checkbox"/> Other _____ | Body Style<br><br><input type="checkbox"/> Sport Vlt<br><input type="checkbox"/> Truck<br><input type="checkbox"/> Motorcycle<br><input type="checkbox"/> 2-Door<br><input type="checkbox"/> 4-Door<br><input type="checkbox"/> Stationwagon<br><input type="checkbox"/> Pick Up Truck<br><input type="checkbox"/> Other _____ |
|----------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|

## FAILED COMPONENT(S)/PART(S) INFORMATION

|                       |                                                                                                       |                                                                                                                                                |                                                                                             |
|-----------------------|-------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------|
| Component<br>02740000 | Part Name(s)<br>TIRES: TREAD                                                                          | Location<br><input type="checkbox"/> Left<br><input type="checkbox"/> Front<br><input type="checkbox"/> Right<br><input type="checkbox"/> Rear | Failed Part(s)<br><input type="checkbox"/> Original<br><input type="checkbox"/> Replacement |
| No. of Failures       | Date(s) of Failure(s) 16-AUG-2000<br>Mileage at Failure(s) 50184<br>Vehicle Speed at Failure(s) _____ | Failed Part(s) Available?<br><input type="checkbox"/> Yes <input type="checkbox"/> No                                                          | NHTSA Previously Contacted?<br><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<br><br><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | Fire<br><br><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | Number of Persons Injured | Number of Fatalities | Estimated Property Damage | Reported to Police<br><br><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |
|----------------------------------------------------------------------------------|---------------------------------------------------------------------------------|---------------------------|----------------------|---------------------------|-----------------------------------------------------------------------------------------------|

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

CONSUMER WAS TRAVELING IN A 1997 FORD PROBE. TIRE SIZE P205/55R15, DOT#W2MJ, AND REST NOT AVAILABLE. ORIGINAL TIRES ON VEHICLE. PASSENGER'S FRONT TIRE BLEWOUT. TIRE SHOP STATED THAT IT WAS BOUND TO HAPPEN WITH ALL TIRES. \*AK

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.



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FOR AGENCY USE ONLY 436

Date Received

16 SEP 11 PM 2:28

16-AUG-2000

OFFICE  
DEFECTS INVESTIGATION

ed or

rt\_dt

od\_rt

16-AUG-2000

16-AUG-2000

Reference No.

867945

## OWNER INFORMATION (Type or Print)

827193

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 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 bottom of windshield on driver's side)

NOT AVAILABLE

Vehicle Make

PROBE  
FIRESTONE

Vehicle Model

FIREHAWK

Vehicle Year

1900 1997

Current Odometer Reading

51579

Purchase Date

10 - 98

Dealer's Name William Chevrolet

Engine Size

(CID/CC/L

No Cylinders 4

☐ Turbo

☐ Diesel

☐ Gas

☒ Fuel Injection

☐ New ☒ Used

City Chicago State IL Zip Code 60617

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 Utl

☐ Truck

☐ Motorcycle

Body Style

☒ 2-Door

☐ 4-Door

☐ Stationwagon

☐ Pick Up Truck

☐ Other

## FAILED COMPONENT(S)/PART(S) INFORMATION

Component  
02740000

Part Name(s)  
TIRES:TREAD

Location

☐ Left

☒ Front

☒ Right

☐ Rear

Failed Part(s)

☐ Original

☐ Replacement

No of Failures

Date(s) of Failure(s) 15-AUG-2000

Mileage at Failure(s) 50184

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

0

Number of Fatalities

0

Estimated Property Damage

0

Reported to Police

☐ Yes ☒ No

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

CONSUMER WAS TRAVELING IN A 1997 FORD PROBE. TIRE SIZE P205/55R15, DOT#W2MJ, AND REST NOT AVAILABLE. ORIGINAL TIRES ON VEHICLE. PASSENGER'S FRONT TIRE BLEWOUT. TIRE SHOP STATED THAT IT WAS BOUND TO HAPPEN WITH ALL TIRES. \*AK

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Fold to show Return Address (no stamp needed) Fasten with tape or staple and mail

INFORMATION ON TIRE FAILURE(S) (IF APPLICABLE)

TIRE IDENTIFICATION NO.\*

DOT W 2 M 3 F X M 4 2 6

MANUFACTURER/TIRE NAME

Firestone Firehawk

SIZE

15

\* The identification number consists of 7 to 10 letters and numerals following the letters DOT. It is usually located near the rim flange on the side opposite the whitewall or on either side of a blackwall tire.

NARRATIVE DESCRIPTION (CONTINUED)

☆ U.S.G.P.O. 1982-523-887 / 60086

U.S. 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

**BUSINESS REPLY MAIL**

FIRST CLASS PERMIT NO. 73173 WASHINGTON, D.C.

POSTAGE WILL BE PAID BY NATL HWY TRAFFIC SAFETY ADMIN.

U.S. Department of Transportation  
National Highway Traffic Safety Administration  
Information Management Staff NSA-10.01  
400 7th Street, SW  
Washington, DC 20590

20590+0000



## Customer's reason for bringing in vehicle:

Replacing both front tires w/alignment.

| VALUED CUSTOMER INFORMATION | VEHICLE INFORMATION                          | VEHICLE DAMAGE          |
|-----------------------------|----------------------------------------------|-------------------------|
| NAME: <u>Kidd</u>           | YEAR: <u>97</u> MAKE: <u>Ford</u>            | MISSING HUB CAPS: _____ |
| HOME PHONE: _____           | MODEL: <u>Probe</u> COLOR: <u>Red</u>        | SCRATCHES: <u>R/K</u>   |
| WORK PHONE: _____           | MILEAGE: <u>51579</u>                        | DENTS: _____            |
| ALT. PHONE/PAGER: _____     | LIC. PLATE: <u>F139 862</u>                  | OTHER: _____            |
| NOTE: _____                 | VIN. #: _____                                |                         |
|                             | VALVE STEM: S _____ M _____ L _____ CS _____ |                         |
|                             | WHEEL LOCKS: <u>Y/N</u>                      |                         |

**CURRENT RIDE CONDITION**

- Is the steering wheel straight? Y/N
- Is the vehicle pulling to one side? Y/N Left / Right
- Is the vehicle vibrating? Y/N At What Speed? \_\_\_\_\_
- During acceleration Y/N
- During braking Y/N
- Is the ride bouncy? Y/N

**ALIGNMENT/SUSPENSION SERVICE INSTRUCTIONS**

☒ Alignment inspection and printout

☐ Steering/suspension inspection

☐ In-warranty alignment

CSA Comments: Align

**CURRENT BRAKE CONDITION**

- Is ABS light on? Y/N
- Is there a noise when braking? Grinding / Squealing
- Does vehicle pull when braking? Y/N Left / Right
- Does pedal pulsate? Y/N
- Is pedal pressure? Low / Soft / Hard / Fade

**BRAKE SERVICE INSTRUCTIONS**

☐ Brake inspection and advise

☐ In-warranty brake check

CSA Comments: \_\_\_\_\_

**CURRENT TIRE CONDITIONS**

Firehawk  
FTX

FRONT SIZE: P205/55/15 H

| LEFT                                    | RIGHT                                   |
|-----------------------------------------|-----------------------------------------|
| Tread Depth: <u>8</u> <u>5</u> <u>5</u> | Tread Depth: <u>5</u> <u>5</u> <u>5</u> |
| Outer Middle Inner                      | Outer Middle Inner                      |
| Is tread wear? <u>Normal/Irregular</u>  | Is tread wear? <u>Normal/Irregular</u>  |

REAR SIZE: P205/55/15

| LEFT                                    | RIGHT                                   |
|-----------------------------------------|-----------------------------------------|
| Tread Depth: <u>8</u> <u>8</u> <u>8</u> | Tread Depth: <u>8</u> <u>8</u> <u>8</u> |
| Outer Middle Inner                      | Outer Middle Inner                      |
| Is tread wear? <u>Normal/Irregular</u>  | Is tread wear? <u>Normal/Irregular</u>  |

**TIRE PLACEMENT/SERVICE INSTRUCTIONS**

☐ In-warranty rotate

☐ In-warranty balance

☐ Road Hazard (flat repair)

☒ Replace tire(s) — (see workorder)

CSA Comments: 2 tires

**CURRENT BATTERY CONDITION**

- Battery brand: DieHard / Other
- Date code: \_\_\_\_\_
- Group size: \_\_\_\_\_
- Type: Top Post / Side Terminal
- Engine size: \_\_\_\_\_
- Corrosion present: Y/N

**STARTING/CHARGING SERVICE INSTRUCTIONS**

☐ System check and advise (SABRE Printout)\* \$ \_\_\_\_\_

☐ In-warranty battery and system check

☐ Replace battery — (see workorder)

CSA Comments: \_\_\_\_\_

CUSTOMER AUTHORIZATION: I hereby authorize this repair facility to inspect, operate and test my vehicle, including necessary road testing. I acknowledge that the diagnostics performed on my vehicle are at no charge, except as specified above. I understand that Sears/NTB is not responsible for loss or damage to my vehicle or articles left in my vehicle resulting from fire, theft, vandalism or any other causes beyond its control.

17402 12/99 Customer Service Request

CUSTOMER'S SIGNATURE

DIAGNOSTIC(S) FEE

DATE

\_\_\_\_\_ \$ \_\_\_\_\_ 8/18/00

CUSTOMER COPY