

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

28-SEP-2000

Od_or

rt_dt

od_rt

up_ltr

Reference No.

871538

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 vehicle or on driver's side)	Vehicle Make	Vehicle Model	Vehicle Year	Current Odometer Reading
1FAFP6631XK165344	FORD	CONTOUR	1999	

Purchase Date	Dealer's Name	Engine Size (CID/CCL)	☐ 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 ☐ Driver's Side Airbag ☐ Passenger's Side Airbag ☐ Motorized ☐ 2-Point Belt	Cruise Control ☐ Yes ☒ No	Drive Train ☐ Front ☐ Rear ☐ 4-Wheel	Vehicle Type ☐ Car ☐ Van ☐ Minivan ☐ Other	Body Style ☐ Sport Vlt ☐ Truck ☐ Motorcycle ☐ 2-Door ☐ 4-Door ☐ Station Wagon ☐ Pick Up Truck ☐ Other
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FAILED COMPONENT(S)/PART(S) INFORMATION

Component 12250000	Part Name(s) INTERIOR SYSTEMS:ACTIVE RESTRAINTS:BELT BUCKLES	Location ☐ Left ☐ Front ☐ Right ☐ Rear	Failed Part(s) ☐ Original ☐ Replacement
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No. of Failures	Dates of Failure(s) 06-SEP-2000 Mileage at Failure(s) Vehicle Speed at Failure(s)	Failed Part(s) Available? Yes No	NHTSA Previously Contacted? Yes 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 ☐ 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)

IN THE REAR SEAT THERE IS A BELT THAT DOESN'T RELEASE. THE BELT HAD TO BE CUT AFTER CONSUMER'S CHILD GOT HER HEAD CAUGHT IN THE BELT. IT LOCKED & THERE WAS NO WAY TO RELEASE IT. DEALER IS LOOKING TO SEE IF THIS IS A DEFECT PROBLEM. DEALER CAN FIX IT, BUT THE CONSUMER DOESN'T WANT IT FIXED UNTIL THEY CAN FIND OUT HOW TO RELEASE THE BELT.

*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.

 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 436 Date Received: <u>26-SEP-2008</u> Office: <u>CRS INVESTIGATION</u> Reference No.: <u>871538</u> Work Number: _____ Home Number: _____	
OWNER INFORMATION (Type or Print) [Redacted] <u>642155</u>					
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: [Redacted] Date: <u>10/1/2008</u>					
VEHICLE INFORMATION					
Vehicle Ident. No. (VIN) (Located at bottom of windshield on driver's side) <u>1FAFP6631XK166344</u>		Vehicle Make <u>FORD</u>		Vehicle Model <u>CONTOUR</u>	
Vehicle Year <u>1999</u>		Current Odometer Reading <u>38,142</u>			
Purchase Date <u>3-6-00</u> ☐ New ☒ Used		Dealer's Name <u>Schultz Ford</u> <u>City: Wexford State: PA Zip Code: _____</u>		Engine Size (CID/CC/L) _____ No. Cylinders <u>4</u> ☐ Turbo ☐ Diesel ☐ Gas ☒ Fuel Injection	
Transmission Type ☐ Manual ☒ Automatic		Antilock Brakes ☐ Yes ☒ No		Restraint Systems ☒ S-Point Belt ☐ Motorized ☐ Driverside Airbag ☐ Z-Point Belt ☐ Passengerside Airbag	
Cruise Control ☒ Yes ☐ No		Drive Train ☐ Front ☐ Rear ☐ 4-Wheel		Vehicle Type ☒ Car ☐ Sport Ute ☐ Van ☐ Truck ☐ Minivan ☐ Motorcycle ☐ Other	
Body Style ☐ 2-Door ☒ 4-Door ☐ Stationwagon ☐ Pick Up Truck ☐ Other					
FAILED COMPONENT(S)/PART(S) INFORMATION					
Component <u>12250000</u>		Part Name(s) <u>INTERIOR SYSTEMS: ACTIVE RESTRAINTS: BELT BUCKLES</u>		Location ☒ Left ☐ Right ☐ Front ☒ Rear	
No. of Failures <u>1</u>		Date(s) of Failure(s) <u>06-SEP-2000</u> Mileage at Failure(s) <u>32,500 EST.</u> Vehicle Speed at Failure(s) <u>25 MPH</u>		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 <u>1</u>	
Number of Fatalities <u>0</u>		Estimated Property Damage <u>0</u>		Reported to Police ☐ Yes ☒ No	
NARRATIVE DESCRIPTION OF FAILURE(S), INCIDENT(S), INJURY(IES)					
IN THE REAR SEAT THERE IS A BELT THAT DOESN'T RELEASE. THE BELT HAD TO BE CUT AFTER CONSUMER'S CHILD GOT HER HEAD CAUGHT IN THE BELT. IT LOCKED & THERE WAS NO WAY TO RELEASE IT. DEALER IS LOOKING TO SEE IF THIS IS A DEFECT PROBLEM. DEALER CAN FIX IT, BUT THE CONSUMER DOESN'T WANT IT FIXED UNTIL THEY CAN FIND OUT HOW TO RELEASE THE BELT. *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.:

D O T

MANUFACTURER/TIRE NAME

SIZE

* 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)

My 5 year old Girl HAD Her neck CAUGHT in
THE BEIT STRAP. She was CHOKING AND HAD A VERY VISIBLE
SCAR BECAUSE OF THIS. THE TOTAL TIME ELAPSED FROM
WHEN THE BEIT WAS AROUND her NECK UNTIL I NOTICED
THE SITUATION COULD NOT HAVE BEEN NO MORE THAN
90 SECONDS AT THE VERY MOST. IF I DIDNT HAVE A
KNIFE AVAILABLE TO CUT THE STRAP I FEEL THE PROBLEM
WOULD HAVE BEEN MUCH MORE SEVERE. IF I DID NOT NOTICE
THE PROBLEM AS SOON AS I DID THIS COULD HAVE BEEN A
FATAL ACCIDENT. I HAVE TALKED TO NUMEROUS FORD REPS.
THE LAST ONE I TALKED WITH BLAMED THIS ON ME FOR NOT
WATCHING MY CHILD PROPERLY - ADVISED ME THAT THIS IS MY
PROBLEM AND FORD IS NOT RESPONSIBLE. I EXPLAINED I WILL LOOK
INTO AN ATTORNEY AND SHE ADVISED ME TO DO SO! (SHE WAS VERY RUDE)
Her name Michelle Hall (313-845-5539) FORD SERVICE REP.
ADDITIONAL INFO AVAILABLE IF NEEDED.

★ U.S.G.P.O.: 1992-629-807 / 30080

U.S. Department
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Traffic Safety
Administration

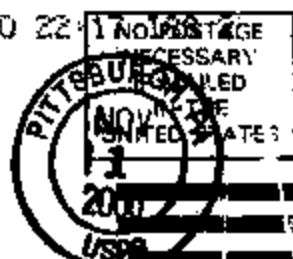
400 Seventh St., S.W.
Washington, D.C. 20590

Official Business
Penalty for Private Use \$300

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BUSINESS REPLY MAIL

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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

