

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 118

Date Received

24-OCT-2000

Oid\_or \_\_\_\_\_  
rt\_dt \_\_\_\_\_  
od\_rt \_\_\_\_\_  
up\_ltr \_\_\_\_\_

Reference No.

873678

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 <b>FIRESTONE</b>	Vehicle Model <b>STEEL TEX</b>	Vehicle Year <b>1900</b>	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 type="checkbox"/> New <input checked="" 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"/> Motorbelt <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 02740000	Part Name(s) TIRES:TREAD	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>16-OCT-2000</u> Mileage at Failure(s) _____ 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)

PE00040 TIRE TREAD SEPARATION: WHILE DRIVING ABOUT 70 MPH, THE TREAD ON THE REAR PASSENGER'S SIDE TIRE CAME OFF. DRIVER WAS ABLE TO MAINTAIN CONTROL OF THE VEHICLE. TIRE SIZE LT26575R16. ORIGINAL TIRE EQUIPMENT ON A 2000, FORD, F250. TIRE MILEAGE 2, 082. FIRESTONE WAS CALLED ABOUT THE TIRE. PLEASE PROVIDE ANY FURTHER INFORMATION AND DOT # IF POSSIBLE.

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.



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National Highway Traffic Safety Administration

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**Vehicle Owner's Questionnaire (VOQ)**

NATIONWIDE 1-888-DASH-2-DOT  
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**FOR AGENCY USE ONLY** 118

Date Received: 10-25-00 7:00 PM '00  
24-OCT-2000  
OFFICE OF DEFECTS INVESTIGATION

Od\_or \_\_\_\_\_  
rd\_dt \_\_\_\_\_  
od\_rt \_\_\_\_\_  
up\_ltr \_\_\_\_\_

Reference No. 873678

Work Number \_\_\_\_\_  
Home Number \_\_\_\_\_

[Redacted]

649434

Do you authorize NHTSA to provide a copy of report to the manufacturer of your vehicle?  
In the absence of an authorization, NHTSA WILL NOT provide your name and address to the vehicle manufacturer.

Signature of Owner: [Redacted] Date: 11/15/00

YES  NO

**VEHICLE INFORMATION**

Vehicle Ident. No. (VIN) (located at bottom of windshield or driver's side) <b>1FTNW21F5VEA57399</b>	Vehicle Make <b>FIRESTONE</b>	Vehicle Model <b>STEEL TEX</b>	Vehicle Year <b>1900 2000</b>	Current Odometer Reading <b>50919</b>
Purchase Date <b>9-21-99</b>	Dealer's Name <b>Vernie Jones Ford</b>		Engine Size (CID/CC/L) No Cylinders _____	<input type="checkbox"/> Turbo <input checked="" type="checkbox"/> Diesel <input type="checkbox"/> Gas <input type="checkbox"/> Fuel Injection
<input checked="" type="checkbox"/> New <input type="checkbox"/> Used	City/State/Zip <b>Jasper GA 30143</b>		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"/> Driverside Airbag <input type="checkbox"/> Passengerside Airbag	Motorbelt <input type="checkbox"/> 2-Point Belt	Cruise Control <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Drive Train <input type="checkbox"/> Front <input type="checkbox"/> Rear <input checked="" type="checkbox"/> 4 Wheel	Vehicle Type <input type="checkbox"/> Car <input type="checkbox"/> Van <input type="checkbox"/> Minivan <input type="checkbox"/> Other
Sport Utl <input checked="" 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 checked="" type="checkbox"/> Other		

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

Component <b>02740000</b>	Part Name(s) <b>TIRES sidewall</b>	Location <input type="checkbox"/> Left <input type="checkbox"/> Front <input checked="" type="checkbox"/> Right <input checked="" type="checkbox"/> Rear	Failed Part(s) <input type="checkbox"/> Original <input checked="" type="checkbox"/> Replacement
No of Failures	Date(s) of Failure(s) <b>18-OCT-2000</b>	Mileage at Failure(s)	Vehicle Speed at Failure(s) <b>70 mph</b>
Failed Part(s) Available?		NHTSA Previously Contacted?	
<input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/> Yes <input checked="" 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 <b>\$1000</b>	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)**

PE00040; **sidewall** SEPARATION: WHILE DRIVING ABOUT 70 MPH, **sidewalls** ON THE REAR PASSENGER'S SIDE TIRE CAME OFF. DRIVER WAS ABLE TO MAINTAIN CONTROL OF VEHICLE. TIRE SIZE LT26575R16. **sidewalls** TIRE EQUIPMENT ON A 2000, FORD, F250. TIRE MILEAGE 2,082. FIRESTONE WAS CALLED ABOUT THE TIRE. PLEASE PROVIDE ANY FURTHER INFORMATION AND DOT # IF POSSIBLE.\*AK

CONTINUE ON BACK IF NEEDED

The Privacy Act of 1974-Public Law 93-570 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 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.



# JACKY JONES



2742 Hwy. 129 S.  
CLEVELAND, GA 30528  
(706) 865-2188

Motorcraft

Service Hours Monday thru Friday 8:00 AM to 5:00 PM

CUSTOMER NO. 108881	ADVISOR C.J. PAYNE 8177	FAC. NO. 1688	ISSUE DATE 09/28/00	INVOICE NO. FDC657306	
[REDACTED]	LABOR RATE	LICENSE NO.	ODOMETER 46238	COLOR 1	
	YEAR / MAKE / MODEL DODGE TRUCK			DELIVERY DATE	DELIVERY MILES
	VEHICLE ID. NO. 1FTNW21F5YE A 62398			SELLING DEALER NO.	PRODUCTION DATE
	F.T.E. NO.			P.O. NO.	R.O. DATE 09/28/00
COMMENTS					

**JOB# 1 CHARGES**

**LABOR**  
 JOB # 01FTTIRE 4 TIRE REPLACEMENT TECH(S): 9100 61.00  
 4 TIRES MOUNTED AND BALANCED- INCLUDES WHEEL WEIGHTS AND TIR  
 DISPOSAL FEES  
 P205/75/R16 115.95 EACH  
 TOTAL CHARGES INCLUDED TOGETHER  
 4 TIRE REPLACEMENT

PARTS	QTY	FP NUMBER	DESCRIPTION	LIST PRICE	UNIT PRICE	PRICE
	4	9003-297615	LT205/75R16 5	99.95	99.95	399.80
TOTAL - PARTS						399.80

**JOB# 1 TOTALS**  
 LABOR 61.00  
 PARTS 399.80  
**JOB# 1 JOURNAL PREFIX FOCs JOB# 1 TOTAL 460.80**

**JOB# 2 CHARGES**

**LABOR**  
 JOB # 2-02FTZ BRAKES TECH(S): 9100 170.50  
 Added Operation (TLM @ 09/28/2000 16:34)  
 BRAKES  
 TURN FRONT ROTORS

PARTS	QTY	FP NUMBER	DESCRIPTION	LIST PRICE	UNIT PRICE	PRICE
	1	FB1Z-2001-EA	KIT-BRAKE SHOE	76.45	76.45	76.45
TOTAL - PARTS						76.45

**JOB# 2 TOTALS**  
 LABOR 170.50  
 PARTS 76.45  
**JOB# 2 JOURNAL PREFIX FOCs JOB# 2 TOTAL 246.95**

MISC	CODE	DESCRIPTION	CONTROL NO.	PRICE
JOB # A	SS	SHOP SUPPLIES		15.00
TOTAL - MISC				15.00

**COMMENTS**  
 DROP OFF 7:45 APPT

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