

 DOT Auto Safety Hotline Vehicle Owner's Questionnaire (VOQ) U.S. Department of Transportation National Highway Traffic Safety Administration NATIONWIDE 1-888-DASH-2-DOT 1-888-327-4236 www.nhtsa.dot.gov/hotline		FOR AGENCY USE ONLY 197	
OWNER INFORMATION (Type or Print) 666767		Date Received 16-JAN-2001	Od_or _____ rt_dt _____ od_rt _____ up_lb _____
		Reference No. 878219	
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)	Vehicle Make FORD TRUCK	Vehicle Model ESCAPE	Vehicle Year 2001
Purchase Date ☐ New ☒ Used		Dealer's Name _____ 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 ☐ Motorbelt ☐ Driverside Airbag ☐ 2-Point Belt ☐ Passengerside Airbag	Cruise Control ☐ Yes ☒ No
Drive Train ☐ Front ☐ Rear ☐ 4-Wheel		Vehicle Type ☐ Car ☐ Sport Ult ☐ Van ☐ Truck ☐ Minivan ☐ Motorcycle ☐ Other _____	
Body Style ☐ 2-Door ☐ 4-Door ☐ Stationwagon ☐ Pick Up ☒ Truck			
FAILED COMPONENT(S)/PART(S) INFORMATION			
Component 07300000	Part Name(s) POWER TRAIN: TRANSMISSION: AUTOMATIC		Location ☐ Left ☐ Right ☐ Front ☐ Rear
Failed Part(s) ☐ Original ☐ Replacement		No of Failures 0	
Date(s) of Failure(s) 16-JAN-2001 Mileage at Failure(s) 250 Vehicle Speed at Failure(s) _____		Failed Part(s) ☐ Yes ☐ No	
NHTSA Previously ☐ 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			
NARRATIVE DESCRIPTION OF FAILURE(S), INCIDENT(S), INJURY(IES)			
CONSUMER IS UNABLE TO USE RADIO BECAUSE TRANSMISSION PAWL IS IN THE WAY AND IS TOO FAR, CAUSING CONSUMER TO SHIFT GEAR WHILE DRIVING.*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.			

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 197

Date Received

16 JAN 2001

OFFICE
DEFECTS INVESTIGATION
 Od_or _____
 rt_dtr _____
 od_rt _____
 up_ltr _____

Reference No.

878219

OWNER INFORMATION (Type or Print)

666767

Work Number

Home Nur

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)		Vehicle Make	Vehicle Model	Vehicle Year	Current Odometer Reading
		FORD TRUCK	ESCAPE	2001	
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	Vehicle Type
☐ Manual ☒ Automatic	☐ Yes ☒ No	☒ 3-Point Belt ☐ Motorbelt ☐ Driverside Airbag ☐ 2-Point Belt ☐ Passengerside Airbag	☐ Yes ☒ No	☐ Front ☐ Rear ☐ 4-Wheel	☐ Car ☐ Van ☐ Minivan ☐ Other
					☐ Sport-Ult ☐ Truck ☐ Motorcycle
					☐ 2-Door ☐ 4-Door ☐ Stationwagon ☐ Pick Up Truck ☒ Other

FAILED COMPONENT(S)/PART(S) INFORMATION

Component 07300000	Part Name(s) POWER TRAIN:TRANSMISSION:AUTOMATIC	Location ☐ Left ☐ Front ☐ Right ☐ Rear	Failed Part(s) ☐ Original ☐ Replacement
No of Failures 0	Date(s) of Failure(s) 16-JAN-2001 Mileage at Failure(s) 250 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
--	---	--------------------------------	---------------------------	---------------------------	---

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

CONSUMER IS UNABLE TO USE RADIO BECAUSE TRANSMISSION PAWL IS IN THE WAY AND IS TOO FAR, CAUSING CONSUMER TO SHIFT GEAR WHILE DRIVING.*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.