



U.S. Department
of Transportation
National Highway
Traffic Safety
Administration

Auto Safety Hotline

Vehicle Owner's Questionnaire

NATIONWIDE 1-800-424-9393
DC METRO AREA (202) 366-0123
INTERNET: <http://www.nhtsa.dot.gov>

FOR AGENCY USE ONLY 252

Date Received

19-JAN-2001

Od_or _____
R_dt _____
Pd_rt _____
Ip_lfr _____

Reference No.

878609

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>(Located at bottom of windshield on driver's side)</small>	Vehicle Make	Vehicle Model	Vehicle Year	Current Odometer Reading		
1FALP52U8SG190642	FORD	TAURUS	1995			
Purchase Date <input type="checkbox"/> New <input checked="" type="checkbox"/> Used	Dealer's Name _____ City _____ State _____ Zip Code _____	Engine Size (CID/CCL) _____ No. Cylinders _____	<input type="checkbox"/> Turbo <input type="checkbox"/> Diesel <input type="checkbox"/> Gas <input type="checkbox"/> Fuel Injection			
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"/> Driverside Airbag <input type="checkbox"/> Passengerside Airbag <input type="checkbox"/> Motorbelt <input type="checkbox"/> 2-Point Belt	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"/> Van <input type="checkbox"/> Minivan <input type="checkbox"/> Other _____ <input type="checkbox"/> Sport Util 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 type="checkbox"/> Other _____

FAILED COMPONENT(S)/PART(S) INFORMATION

Component 02740000	Part Name(s) TIRES:TREAD	Location <input type="checkbox"/> Left <input type="checkbox"/> Front <input type="checkbox"/> Right <input type="checkbox"/> Rear	Failed Part(s) <input type="checkbox"/> Original <input type="checkbox"/> Replacement
No. of Failures 0	Date(s) of Failure(s) 17-JAN-2000 Mileage at Failure(s) 7499E Vehicle Speed at Failure(s) 0	Failed Part(s) Available? <input type="checkbox"/> Yes <input type="checkbox"/> No	NHTSA Previously Contacted? <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 <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Fire <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Number of Persons Injured 0	Number of Fatalities 0	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)

PEE 048; WAS TRAVELING 10MPH ON A SIDE STREET AND HEARD A NOISE . WHEN TIRE BLEWOUT SHE WAS SITTING STILL. DRIVERS SIDE TIRE TREAD SEPARATED AND EXPLODED. GOODYEAR, P205165/R15, THERE WERE NO INJURIES. *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 Vehicle Owner's Questionnaire (VOQ) U.S. Department of Transportation National Highway Traffic Safety Administration www.nhtsa.dot.gov/hotline		FOR AGENCY USE ONLY 252 Date Received: 19-JAN-2001 FEB - 2 11:11 19-JAN-2001 OFFICE OF DEFECTS INVESTIGATION	
OWNER INFORMATION (Type or Print) [Redacted] 688223		Od or _____ ft_dt _____ od_ft _____ up_ltr _____ Reference No. 878609 Work Number _____ Home Num [Redacted]	
Do you authorize NHTSA to provide a copy of report to the manufacturer of your vehicle? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO In the absence of an authorization, NHTSA will NOT provide your name and address to the vehicle manufacturer.			
Signature of Owner [Redacted]		Date 1/31/01	
VEHICLE INFORMATION			
Vehicle Ident. No. (VIN) (Located at bottom of windshield on driver's side) 1FALP62U85G180642	Vehicle Make FORD	Vehicle Model TAURUS	Vehicle Year 1995
Current Odometer Reading 74996			
Purchase Date 12-94	Dealer's Name Koenigke	Engine Size (CID/CC/L) No Cylinders 6	<input type="checkbox"/> Turbo <input type="checkbox"/> Diesel <input type="checkbox"/> Gas <input checked="" type="checkbox"/> Fuel Injection
<input checked="" type="checkbox"/> New <input checked="" type="checkbox"/> Used	City Reedsburg State WIS Zip Code 539		
Transmission Type <input type="checkbox"/> Manual <input checked="" type="checkbox"/> Automatic	Antilock Brakes <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Restraint System <input type="checkbox"/> 3-Point Belt <input type="checkbox"/> Motorbelt <input checked="" type="checkbox"/> Driverside Airbag <input checked="" type="checkbox"/> 2-Point Belt <input checked="" type="checkbox"/> Passengerside Airbag	Cruise Control <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Drive Train <input checked="" type="checkbox"/> Front <input type="checkbox"/> Rear <input type="checkbox"/> 4-Wheel	Vehicle Type <input checked="" type="checkbox"/> Car <input type="checkbox"/> Van <input type="checkbox"/> Minivan <input type="checkbox"/> Other	Body Style <input type="checkbox"/> Sport Ut <input type="checkbox"/> Truck <input type="checkbox"/> Motorcycle <input checked="" type="checkbox"/> 2-Door <input checked="" type="checkbox"/> 4-Door <input type="checkbox"/> Stationwagon <input type="checkbox"/> Pick Up Truck <input type="checkbox"/> Other	
FAILED COMPONENT(S)/PART(S) INFORMATION			
Component 02740000	Part Name(s) TIRES:TREAD Spring fell down to far + cut the tire. Spring broke	Location <input checked="" type="checkbox"/> Left <input type="checkbox"/> Right <input checked="" type="checkbox"/> Front <input type="checkbox"/> Rear	Failed Part(s) <input checked="" type="checkbox"/> Original <input type="checkbox"/> Replacement
No of Failures 0	Date(s) of Failure(s) 17-JAN-2000 Mileage at Failure(s) 74996 Vehicle Speed at Failure(s) n about 10 MPH	Failed Part(s) Available? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	NHTSA Previously Contacted? <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 <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Fire <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Number of Persons Injured 0	Number of Fatalities 0
Estimated Property Damage		Reported to Police <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
NARRATIVE DESCRIPTION OF FAILURE(S), INCIDENT(S), INJURY(IES)			
PEE 048; WAS TRAVELING 10MPH ON A SIDE STREET AND HEARD A NOISE. WHEN TIRE BLEWOUT SHE WAS SITTING STILL. DRIVERS SIDE TIRE TREAD SEPARATED AND EXPLODED. GOODYEAR, P205165/R15, THERE WERE NO INJURIES. *AK When tires blew out I stopped bang. I wasn't sitting still. the spring broke in two + the coil spring cut the tires. the people who fixed this said the coil spring should never have			
CONTINUE ON BACK IF NEEDED			
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National Highway Traffic Safety Administration
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come that far down. At 10 MPH flew ahead seat belts held me. the springs were less locked front wheel. car was down so low couldn't get jack under car to change tires. The people who fixed this car said if I'd been going down the highway at 55 MPH it could of been a disaster. They told me to notify you's. Some cars were recalled for this but not tauros. I know I won't be paid for my troubles but I don't care. But I do think this should be looked at as its a hazard.

I have all parts at my residents.

I purchased this Vehicle New

It has Anti lock brakes

It has cruise control

Needed new Coil Springs - Staff Bar - tires -

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.									
MANUFACTURER/TIRE NAME									
SIZE									
INFORMATION ON TIRE FAILURE(S) (IF APPLICABLE)									
THE IDENTIFICATION NO.									
FOOT TO SHOW RETURN ADDRESS (NO STAMP NEEDED) FASTEN WITH TAPE OR STAPLE AND MAIL									