



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 151

Date Received

21-FEB-2001

Od\_or \_\_\_\_\_  
R\_dt \_\_\_\_\_  
Pd\_rt \_\_\_\_\_  
Ip\_ltr \_\_\_\_\_

Reference No.

880971

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
	MAZDA	RX7	1994	

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

Component 05200000 05230000 05220000	Part Name(s) ENGINE COOLING SYSTEM ENGINE COOLING SYSTEM:PUMP:WATER ENGINE COOLING SYSTEM:HOSES	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
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No. of Failures	Date(s) of Failure(s) 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)

THERE WAS COOLANT LEAKING FROM VEHICLE ONTO ENGINE. VEHICLE WAS NOT INCLUDED IN RECALL 94V094000. DEALER HAS REPLACED WATER PUMP/ RADIATOR HOSES AND GASKETS. \*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 Transportation  
 National Highway Traffic Safety Administration  
 DOT Auto Safety Hotline  
 1-888-327-4236  
 www.nhtsa.dot.gov/hotline

**Vehicle Owner's Questionnaire (VOQ)**  
 NATIONWIDE 1-888-DASH-2-DOT

FOR AGENCY USE ONLY 151

Date Received: FEB-6 2001  
 Office: 880971  
 Reference No.: 880971

Work Number: [Redacted]  
 Home Number: [Redacted]

Do you authorize NHTSA to provide a copy of report to the manufacturer of your vehicle?  YES  NO

In the absence of an authorized agent, please provide your name and address to the vehicle manufacturer.

Signature of Owner: [Redacted] Date: 3/18/01

**VEHICLE INFORMATION**

Vehicle Identification No. (VIN): [Redacted] Location at bottom of [Redacted]

Vehicle Make: MAZDA Vehicle Model: RX7 Vehicle Year: 1994 Current Odometer Reading: 26,000

Purchase Date: 4-7-94 Dealer's Name: Blue Ridge Mazda City: Rye Town, MD State: MD Zip Code: 64133

Engine Size: 1.6L (cid/cc) Fuel Type: Gas Turbo Diesel Fuel Injection:  Turbo Diesel  Gas  Fuel Injection

**TRANSMISSION TYPE**  Manual  Automatic

**ANTIBLOCK BRAKES**  Yes  No

**RESTRAINT SYSTEM**  3-Point Belt  Driver Side Airbag  Passenger Side Airbag

**CRUISE CONTROL**  Yes  No

**DRIVE TRAIN**  Front  Rear  4-Wheel

**VEHICLE TYPE**  Car  Van  Minivan  Other

**BODY STYLE**  Sport Utility  Truck  Van  Motorcycles  2-Door  4-Door  Station Wagon  Pick Up Truck  Other

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

Component	Part Name(s)	Location	Failed Part(s)	Replacement
08220000 08230000 08220000	ENGINE COOLING SYSTEM ENGINE COOLING SYSTEM-PUMP/WATER ENGINE COOLING SYSTEM-HOSES	Left Front	Right Rear	<input checked="" type="checkbox"/> Original <input type="checkbox"/> Replacement

**NO OF FAILURES** 1

**DATE(S) OF FAILURE(S)** 2/15/01

**MILEAGE AT FAILURE(S)** 25732

**VEHICLE SPEED AT FAILURE(S)** N/A

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** n/a

**NUMBER OF FATALITIES** n/a

**ESTIMATED PROPERTY DAMAGE** n/a

**REPORTED TO POLICE**  Yes  No

**NARRATIVE DESCRIPTION OF FAILURE(S), INCIDENT(S), INJURY(ES)**

THERE WAS COOLANT LEAKING FROM VEHICLE ONTO ENGINE. VEHICLE WAS NOT INCLUDED IN RECALL 94V094000. DEALER HAS REPLACED WATER PUMP/RADIATOR HOSES AND GASKETS. AK The description of the recall, 94V094000, with NHTSA website exactly describes what happened to my car. Please refer to help.

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.

CONTINUE ON BACK IF NEEDED