



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 197

Date Received

07-MAR-2001

Od_or _____
rt_dt _____
pd_rt _____
rp_lr _____

Reference No.

882354

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>(Location at bottom of and/or above driver's side)</small>	Vehicle Make	Vehicle Model	Vehicle Year	Current Odometer Reading		
1FALP653XSK200525	FORD	CONTOUR	1995			
Purchase Date <input type="checkbox"/> New <input checked="" type="checkbox"/> Used	Dealer's Name _____ City _____ State _____ Zip Code _____	Engine Size (CID/CC/L) _____ No. Cylinders _____	<input type="checkbox"/> Turbo <input type="checkbox"/> Diesel <input type="checkbox"/> Gas <input type="checkbox"/> Fuel Injectio			
Transmission Type <input type="checkbox"/> Manual <input 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"/> Motorbelt <input type="checkbox"/> Driverside Airbag <input type="checkbox"/> 2-Point Bel <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 Util <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 _____

FAILED COMPONENT(S)/PART(S) INFORMATION

Component 05240000	Part Name(s) ENGINE COOLING SYSTEM:FAN	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
No. of Failure 0	Date(s) of Failure(s) 01-AUG-2000 Failure(s) 93000 Mileage at Failure(s) 0	Failed Part(s) <input type="checkbox"/> Yes <input type="checkbox"/> No	NHTSA Previously <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 Damag	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)

CONSUMER HAD TO REPLACE ENGINE DUE TO ENGINE COOLING FAN MALFUNCTIONING, CAUSING ENGINE TO MELT. AND WAS REPLACED. PRESENTLY, CONSUMER HAD RECEIVED MANUFACTURER'S RECALL 00S44 FOR ENGINE COOLING FAN.*AK

COPIED FROM NHTSA FORM 101

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.

Updated

 <p>U.S. Department of Transportation National Highway Traffic Safety Administration</p>	<p>DOT Auto Safety Hotline</p> <p>Vehicle Owner's Questionnaire (VOQ)</p> <p>NATIONWIDE 1-888-DASH-2-DOT 1-888-327-4236 www.nhtsa.dot.gov/hotline</p>	<p>FOR AGENCY USE ONLY - <u>RECEIVED</u></p> <p>Date Received <u>01 JUL 16 PM 5:44</u></p> <p><u>07-MAR-2008</u> DEFECT OFFICE INVESTIGATION</p> <p>Reference No. 882354</p>
	<p>OWNER INFORMATION (Type or Print)</p> <p>[Redacted] 678834</p> <p>Work Number [Redacted] Home Number [Redacted]</p>	

Do you authorize NHTSA to provide information to the manufacturer of your vehicle? YES NO
 In the absence of an authorized signature, this questionnaire is void. Please print name and address to the vehicle manufacturer.
 Signature of Owner [Redacted] Date 3/22/08

VEHICLE INFORMATION						
Vehicle Ident. No. (VIN) <small>(Indicated a bottom of windshield on driver's side)</small>	Vehicle Make	Vehicle Model	Vehicle Year	Current Odometer Reading		
1FALP653XSK200525	FORD	CONTOUR	1995	93700.00		
Purchase Date <u>10/3/98</u>	Dealer's Name <u>Robert Young</u>		Engine Size (CID/G/L) <u>2.3L</u>	<input type="checkbox"/> Turbo <input type="checkbox"/> Diesel <input checked="" type="checkbox"/> Gas <input checked="" type="checkbox"/> Fuel Injection		
<input type="checkbox"/> New <input checked="" type="checkbox"/> Used	City <u>Northwich</u> State <u>AK</u> Zip Code <u>71653</u>	No Cylinders <u>4</u>				
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"/> Motorbelt <input type="checkbox"/> Driverside Airbag <input type="checkbox"/> 2-Point Belt <input 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"/> Sport Ut <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 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 06240000	Part Name(s) ENGINE COOLING SYSTEM:FAN	Location <input 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) <u>01-ALG-2000</u>	Failed Part(s) Available? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	NHTSA Previously Contacted? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
	Mileage at Failure(s) <u>93000</u>		
	Vehicle Speed at Failure(s) <u>0 55 mph</u>		

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 <u>5,200.00</u>	Reported to Police <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

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

CONSUMER HAD TO REPLACE ENGINE DUE TO ENGINE COOLING FAN MALFUNCTIONING, CAUSING ENGINE TO MELT. AND WAS REPLACED. PRESENTLY, CONSUMER HAD RECEIVED MANUFACTURER'S RECALL 00S44 FOR ENGINE COOLING FAN.*AK

**THE FOLLOWING PAGES ARE WITHHELD TO
PROTECT UNWARRANTED INVASION OF
PERSONAL PRIVACY PURSUANT TO
EXEMPTION 6 OF THE FREEDOM OF
INFORMATION ACT, 5 U.S.C. 552(b)(6)**

(Page 1 through Page 4)

Fyburn Ford Monticello, AR 71655 870-367-5

I feel Fyburn purposely lengthened which by
time 40.5 hours took 31 wks, 30 wks over time
They knew the fan was making rackets but
ignored it until the 2nd visit where after
10 wks hood and (motor fan) replaced as warranty.
But miss still remained detailing torque converter
didn't seat thus bending it causing damage to
adjacent sensor when motor was installed the
initial visit with over heated engine was replaced,
that issue has been denied by Fyburn. After
several consultations with former Fyburn employees
a certain type of neg. responses to fear for jobs,
Fly wheels don't bend unless misinstallation, MVA,
or by running over something nothing of which I
did.

Please respond as to what direction this needs to be taken

over.

James J. [Signature]

Failed Components / parts

1st wiring shaffing problems? recall at
Hybus how letter.

2nd Engine Cooling Fan

3rd Recall ? questionable # letter at Hybus
maybe part of #2 fuse insulator