



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 758

Date Received

17-APR-2001

Od_or _____
rt_dt _____
pd_rt _____
rp_lr _____

Reference No.

886074

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) (Locate at bottom of windshield or driver's side) 1FTDF15Y1LLA13461	Vehicle Make FORD TRUCK	Vehicle Model F150	Vehicle Year 1994	Current Odometer Reading
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 Bel ☐ Passengerside Airbag	Cruise Control ☒ Yes ☐ No	Drive Train ☐ Front ☐ Rear ☐ 4-Wheel
Vehicle Type ☐ Car ☐ Sport Util ☐ Van ☐ Truck ☐ Minivan ☐ Motorcycle ☐ Other _____		Body Style ☐ 2-Door ☐ 4-Door ☐ Stationwagon ☐ Pick Up Truck ☐ Other _____		

FAILED COMPONENT(S)/PART(S) INFORMATION

Component 05100000 08500000 08530002	Part Name(s) ENGINE ELECTRICAL SYSTEM:IGNITION ELECTRICAL SYSTEM:IGNITION:COIL	Location ☐ Left ☐ Right ☐ Front ☐ Rear	Failed Part(s) ☐ Original ☐ Replacement
No of Failure	Date(s) of Failure(s) C1-FEB-2001 98000 Mileage 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	Number of Fatalities	Estimated Property Damag	Reported to Police ☐ Yes ☒ No
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NARRATIVE DESCRIPTION OF FAILURE(S), INCIDENT(S), INJURY(IES)

VEHICLE WAS STALLING AT 45 MPH, NOT ABLE TO START AGAIN UNTIL VEHICLE HAD COOLED DOWN, 35-45 MINUTES. THEN, VEHICLE WOULD RUN FOR 20-25 MINUTES AND STALL AGAIN. DEALER REPLACED IGNITION MODULE AND COIL.*AK

COPIES OF REPORTS - FEB 2001

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 Vehicle Owner's Questionnaire (VOQ) NATIONWIDE 1-888-DASH-2-DOT 1-888-327-4236 www.nhtsa.dot.gov/hotline		FOR AGENCY USE ONLY 758	
		Date Received 17-APR-2001	
OWNER INFORMATION (Type or Print) 888613		Od, or rt, dt od, rt up, jtr 	
		Reference No. 886074	
Do you authorize NHTSA to provide a copy of report to the manufacturer of your vehicle? In the absence of _____ address to the vehicle manufacturer. Signature of Owner _____ Date <u>05/1/01</u>		☒ YES ☐ NO	
VEHICLE INFORMATION			
Vehicle Ident. No. (VIN) (Located on corner of windshield on driver's side) 1FTDF15Y1LLA13461		Vehicle Make FORD TRUCK	
Vehicle Model F150		Vehicle Year 1990	
Current Odometer Reading 99,360			
Purchase Date ☐ New ☒ Used		Dealer's Name <u>CROSS RD. FORD</u> City <u>FRANKFORT</u> State <u>Ky</u> Zip Code <u>40601</u>	
Engine Size (CID/GCC/L) <u>4.9</u> No Cylinders <u>6</u>		☐ 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 Utl ☐ Van ☒ Truck ☐ Minivan ☐ Motorcycle ☐ Other	
Body Style ☐ 2-Door ☐ 4-Door ☐ Stationwagon ☒ Pick Up Truck ☐ Other			
FAILED COMPONENT(S)/PART(S) INFORMATION			
Component 05100000 08500000 08530002		Part Name(s) ENGINE ELECTRICAL SYSTEM:IGNITION ELECTRICAL SYSTEM:IGNITION:COIL	
Location ☐ Left ☐ Right ☐ Front ☐ Rear		Failed Part(s) ☒ Original ☐ Replacement	
No of Failures 4		Date(s) of Failure(s) <u>01-FEB-2001</u> Mileage at Failure(s) <u>98000</u> Vehicle Speed at Failure(s) <u>45 TO 60</u>	
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		Number of Fatalities	
Estimated Property Damage		Reported to Police ☐ Yes ☒ No	
NARRATIVE DESCRIPTION OF FAILURE(S), INCIDENT(S), INJURY(IES)			
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CONTINUE ON BACK IF NEEDED

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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 2)



