



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 558

Date Received

22-MAY-2001

Od_or _____
rt_dt _____
pd_rt _____
rp_lr _____

Reference No.

888899

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)		Vehicle Make	Vehicle Model	Vehicle Year	Current Odometer Reading
1FTSE31S1YEB40580		FORD TRUCK	F350	2000	
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 Bel ☐ Passengerside Airbag	☒ Yes ☐ No	☐ Front ☐ Rear ☒ 4-Wheel	☐ 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 01300000 01200000	Part Name(s) STEERING POWER ASSIST STEERING GEAR BOX	Location ☐ Left ☐ Right ☐ Front ☐ Rear	Failed Part(s) ☐ Original ☐ Replacement
No of Failure	Date(s) of Failure(s) 29-SEP-2000 8600 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 Damage	Reported to Police ☐ Yes ☒ No
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NARRATIVE DESCRIPTION OF FAILURE(S), INCIDENT(S), INJURY(IES)

STEERING LOCKED UP WHILE VEHICLE WAS IN MOTION. THIS DEFECT CAUSED DAMAGE TO VEHICLE SINCE CONSUMER DID NOT HAVE CONTROL OF VEHICLE. DEALER REPLACED GEAR BOX, BUT THE PROBLEM CONTINUED. *AK

COPIES OF THIS FORM ARE:

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 NATIONWIDE 1-888-DASH-2-DOT 1-888-327-4236 www.nhtsa.dot.gov/hotline		FOR AGENCY USE ONLY 558 Date Received <u>22-MAY-2001</u> Reference No. <u>888899</u> Work Number _____ Home Number _____	
OWNER INFORMATION (Type or Print) [Redacted] 693478		Do you authorize NHTSA to provide a copy of report to the manufacturer of your vehicle? In the absence of your name and address to the vehicle manufacturer. Signature of Owner [Redacted] Date <u>9/22/02</u>	
VEHICLE INFORMATION			
Vehicle Ident. No. (VIN) (Located at bottom of windshield on driver's side)	Vehicle Make	Vehicle Model	Vehicle Year
<u>1FT7SE31S1YEB40580</u>	<u>FORD TRUCK</u>	<u>F350</u>	<u>2000</u>
Purchase Date <u>11/29/99</u>	Dealer's Name <u>Capital City Ford</u>		Current Odometer Reading <u>22,000</u>
☒ New ☐ Used	City <u>Lancaster, Mo</u> State <u>N.J.</u> Zip Code _____		Engine Size (CID/CC/L) _____ No Cylinders <u>10</u>
Transmission Type ☐ Manual ☒ Automatic	Antilock Brakes ☐ Yes ☒ No	Restraint System ☐ 3-Point Belt ☐ Driverside Airbag ☐ Passengerside Airbag ☐ Motorbelt ☒ 2-Point Belt	Cruise Control ☒ Yes ☐ No
Drive Train ☐ Front ☐ Rear ☒ 4-Wheel	Vehicle Type ☐ Car ☐ Van ☐ Minivan ☐ Other	Body Style ☐ 2-Door ☐ 4-Door ☐ Stationwagon ☒ Pick Up Truck	☐ Turbo ☐ Diesel ☒ Gas ☐ Fuel Injection
FAILED COMPONENT(S)/PART(S) INFORMATION			
Component <u>01200000</u> <u>01300000</u>	Part Name(s) <u>STEERING:GEAR BOX</u> <u>STEERING:POWER ASSIST</u>	Location ☐ Left ☐ Front ☐ Right ☐ Rear	Failed Part(s) ☒ Original ☐ Replacement
No. of Failures <u>4</u>	Date(s) of Failure(s) <u>29-SEP-2000</u> Mileage at Failure(s) <u>8600</u> Vehicle Speed at Failure(s) <u>varies</u>	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 <u>1</u>	Number of Fatalities <u>0</u>
Estimated Property Damage <u>0</u>		Reported to Police ☐ Yes ☒ No	
NARRATIVE DESCRIPTION OF FAILURE(S), INCIDENT(S), INJURY(IES) STEERING LOCKED UP WHILE VEHICLE WAS IN MOTION. THIS DEFECT CAUSED DAMAGE TO VEHICLE SINCE CONSUMER DID NOT HAVE CONTROL OF VEHICLE. DEALER REPLACED GEAR BOX, BUT THE PROBLEM CONTINUED. *AK DEFECT CAUSED BODILY INJURY TO CONSUMER WHILE TRYING TO CONTROL VEHICLE (POWER STEERING LOCKED UP WHILE APPLYING BRAKES)			
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.			

Narrative Description of Incident(s), Failure(s), Crash(es), and Injury(ies)

power steering locked up and jerked back while turning
vehicle around causing left shoulder to be injured with
a tear. This condition of steering has happened
several times and is still present.

ATTACH ADDITIONAL SHEETS IF NECESSARY

U.S. Department
of Transportation

National Highway
Traffic Safety
Administration

400 Seventh St., S.W.
Washington, D.C. 20590

Official Business
Penalty for Private Use \$300

BUSINESS REPLY MAIL

FIRST CLASS PERMIT NO 73173 WASHINGTON, D.C.

POSTAGE WILL BE PAID BY NATL. HWY. TRAFFIC SAFETY ADMIN.

U.S. Department of Transportation
National Highway Traffic Safety Administration
DOT Auto Safety Hotline, NSA-10.1
400 7th Street, SW
Washington, DC 20590

2059040001



NO POSTAGE
NECESSARY
IF MAILED
IN THE
UNITED STATES



**VEHICLE
OWNER'S**

QUESTIONNAIRE

DOT AUTO SAFETY HOTLINE

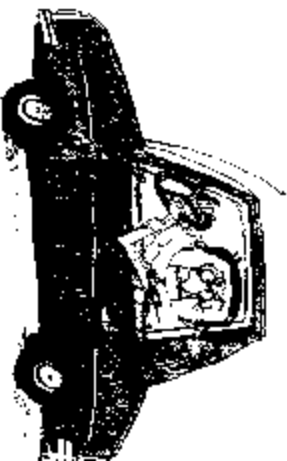
TO REPORT VEHICLE SAFETY DEFECTS
COMPLETE THIS FORM
OR

DASH2DOT

and dial toll free at

1-888-DASH-2-DOT
1-888-327-4236

DOT Auto Safety Hotline
(DASH) 2 DOT



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National Highway Traffic Safety
Administration
<http://www.nhtsa.dot.gov/hotline>