



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 241

Date Received

24-MAY-2001

Od_or _____
rt_dt _____
pd_rt _____
rp_lr _____

Reference No.

889113

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
1FALP52U6VAL70229		FORD	TAURUS	1997	
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 ☐ Driverside Airbag ☐ Passengerside Airbag ☐ Motorbelt ☐ 2-Point Belt	☐ Yes ☒ No	☐ Front ☐ Rear ☐ 4-Wheel	☐ Car ☐ Van ☐ Minivan ☐ Other _____ ☐ Sport Utl ☐ Truck ☐ Motorcycle
					Body Style
					☐ 2-Door ☐ 4-Door ☐ Stationwagon ☐ Pick Up Truck ☐ Other _____

FAILED COMPONENT(S)/PART(S) INFORMATION

Component 07300000	Part Name(s) POWER TRAIN:TRANSMISSION:AUTOMATIC	Location ☐ Left ☐ Right ☐ Front ☐ Rear	Failed Part(s) ☐ Original ☐ Replacement
No of Failure	Date(s) of Failure(s) 23-MAY-2001 88000 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)

97 V 097 000/AUTOMATIC TRANSMISSION: TRANSMISSION SLIPPING INTERMITTENTLY. DEALER WAS NOTIFIED, AND INFORMED CONSUMER THAT THIS VEHICLE WAS NOT COVERED UNDER RECALL DUE TO VIN. FEEL FREE TO PROVIDE US WITH ANY FURTHER DETAILS ON THIS MATTER. *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.

U.S. Department
of TransportationNational 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

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RECEIVED

JUN 27 PM 12:47
24-MAY-2001

OFFICE

DEFECTS INVESTIGATION

 Old or
 rt_dl _____
 od_rt _____
 up_lr _____

Reference No.

889113

OWNER INFORMATION (Type or Print)

416005

Work Number

Home Number

Do you authorize NHTSA to provide a copy of report to the manufacturer of your vehicle?

In the absence of a signature, your name and address to the vehicle manufacturer.

Signature of Owner

Date 1/1/

VEHICLE INFORMATION

Vehicle Ident. No. (VIN) (Located at bottom of windshield on driver's side)		Vehicle Make	Vehicle Model	Vehicle Year	Current Odometer Reading
1FALP52U6VAL70229		FORD	TAURUS	1997	87 xxx
Purchase Date	Dealer's Name <u>Woolly Sanders Ford</u>		Engine Size (CID/CC/L)	☐ Turbo ☐ Diesel ☐ Gas ☒ Fuel Injection	
☐ New ☒ Used	City <u>Perth</u>	State <u>OH</u>	Zip Code <u>452</u>	No Cylinders <u>6</u>	
Transmission Type	Antilock Brakes	Restraint System		Chassis Control	Vehicle Type
☐ Manual ☒ Automatic	☒ Yes ☐ No	☒ 3-Point Belt ☐ Motorbelt ☒ Driverside Airbag ☐ 2-Point Belt ☒ Passengerside Airbag		☒ Yes ☒ No <u>Acc CC</u>	☒ Car ☐ Van ☐ Minivan ☐ Other
				☒ Front ☐ Rear ☐ 4-Wheel	☐ Sport Utl ☐ Truck ☐ Motorcycle
					☐ 2-Door ☒ 4-Door ☐ Stationwagon ☐ Pick Up Truck ☐ Other

FAILED COMPONENT(S)/PART(S) INFORMATION

Component 07300000	Part Name(s) POWER TRAIN: TRANSMISSION: AUTOMATIC	Location ☐ Left ☐ Right ☐ Front ☐ Rear	Failed Part(s) ☐ Original ☐ Replacement
No of Failures 10-12	Date(s) of Failure(s) <u>23-MAY-2001</u> Mileage at Failure(s) <u>88000</u> Vehicle Speed at Failure(s) <u>6-25 mph</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
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NARRATIVE DESCRIPTION OF FAILURE(S), INCIDENT(S), INJURY(IES)

97 V 097 000/AUTOMATIC TRANSMISSION: TRANSMISSION SLIPPING INTERMITTENTLY. DEALER WAS NOTIFIED, AND INFORMED CONSUMER THAT THIS VEHICLE WAS NOT COVERED UNDER RECALL DUE TO VIN. FEEL FREE TO PROVIDE US WITH ANY FURTHER DETAILS ON THIS MATTER. *AK

CONTINUE ON BACK IF NEEDED

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