



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 §20

Date Received

25-MAY-2001

Od_or _____
rt_dt _____
pd_rt _____
rp_lr _____

Reference No.

889152

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
2FTDF15N8PCA34507	FORD TRUCK	F150	1993	

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	Body Style
☐ 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 _____	☐ 2-Door ☐ 4-Door ☐ Stationwagon ☒ Pick Up Truck ☐ Other _____

FAILED COMPONENT(S)/PART(S) INFORMATION

Component 06315000 06110000	Part Name(s) FUEL:FUEL INJECTION:UNKNOWN TYPE:REGULATOR FUEL:FUEL TANK ASSEMBLY	Location ☐ Left ☐ Right ☐ Front ☐ Rear	Failed Part's ☐ Original ☐ Replacement
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No of Failure	Date(s) of Failure(s) 01-MAR-2001 100348	Failed Part(s) ☐ Yes ☐ No	NHTSA Previously ☐ Yes ☐ 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 ☐ Yes ☒ No	Fire ☐ Yes ☒ No	Number of Persons Injured 0	Number of Fatalities 0	Estimated Property Damag 0	Reported to Police ☐ Yes ☒ No
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NARRATIVE DESCRIPTION OF FAILURE(S), INCIDENT(S), INJURY(IES)

FUEL TANK LEAKED BECAUSE OF BUILT UP PRESSURE WHEN CONSUMER REMOVED THE CAP FROM TANK. MANUFACTURER INFORMED CONSUMER THAT THIS VEHICLE WAS NOT INCLUDED IN RECALLS 93V125000 OR 00V424000 DUE TO VIN. PLEASE PROVIDE ANY ADDITIONAL INFORMATION/ATTACHMENTS. *AK

COPIES OF REPORTS - FREE -

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) NATIONWIDE 1-888-DASH-2-DOT 1-888-327-4236 www.nhtsa.dot.gov/hotline		FOR AGENCY USE ONLY 820	
		RECEIVED JUN 19 PM 1:49 25-MAY-2001 OFFICE DEFECTS INVESTIGATION	
OWNER INFORMATION (Type or Print)		Reference No. 889152	
[Redacted] 693997		Work 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 authorization, NHTSA WILL NOT provide your name and address to the vehicle manufacturer.			
Signature of Owner [Redacted]		Date <u>6/12/2001</u>	
VEHICLE INFORMATION			
Vehicle Ident. No. (VIN) (Located at bottom of windshield on driver's side) 2FTDF15N8PCA34507		Vehicle Make FORD TRUCK Vehicle Model F150 Vehicle Year 1993 Current Odometer Reading 100300	
Purchase Date ☒ New ☐ Used		Dealer's Name Chuck Miller Ford City Houston State Tx Zip Code _____ Engine Size (CID/CC/L) 302 No. Cylinders 8 ☐ Turbo ☐ Diesel ☐ Gas ☒ Fuel Injection	
Transmission Type ☐ Manual ☒ Automatic	Antilock Brakes ☒ Yes ☐ No	Restraint System ☒ 2-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 06315000 06110000	Part Name(s) FUEL:FUEL INJECTION:UNKNOWN TYPE:REGULATOR FUEL:FUEL TANK ASSEMBLY		Location ☐ Left ☐ Right ☒ Front ☐ Rear
Failed Part(s) ☒ Original ☐ Replacement		No of Failures Date(s) of Failure(s) <u>01-MAR-2001</u> Mileage at Failure(s) <u>100348</u> Vehicle Speed at Failure(s) _____	
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 0	Number of Fatalities 0
Estimated Property Damage		Reported to Police ☐ Yes ☒ No	

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

FUEL TANK LEAKED BECAUSE OF BUILT UP PRESSURE WHEN CONSUMER REMOVED THE CAP FROM TANK. MANUFACTURER INFORMED CONSUMER THAT THIS VEHICLE WAS NOT INCLUDED IN RECALLS 93V125000 OR 00V424000 DUE TO VIN. PLEASE PROVIDE ANY ADDITIONAL INFORMATION/ATTACHMENTS. *AK

CONTINUE ON BACK IF NEEDED

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