



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

20-JUN-2001

Od_or _____
rt_dt _____
pd_rt _____
rp_lr _____

Reference No.

890821

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 door)	Vehicle Make	Vehicle Model	Vehicle Year	Current Odometer Reading
1FALP6537TGK22257	FORD	CONTOUR	1996	
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 08510000	Part Name(s) ELECTRICAL SYSTEM:IGNITION:SWITCH	Location ☐ Left ☐ Right ☐ Front ☐ Rear	Failed Part(s) ☐ Original ☐ Replacement
No of Failure	Date(s) of Failure(s) 02-JUN-2001 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 0	Number of Fatalities 0	Estimated Property Damag 	Reported to Police ☐ Yes ☒ No
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NARRATIVE DESCRIPTION OF FAILURE(S), INCIDENT(S), INJURY(IES)

IGNITION FAILS TO COMPLETELY SHUT VEHICLE OFF WHEN TURNED TO OFF POSITION, AND THE KEY IS REMOVED. CONSUMER STATED THAT IT ALSO TAKES EXCESSIVE EFFORT TO INSERT OR REMOVE KEY FROM IGNITION. DEALERSHIP HAS EXAMINED VEHICLE, AND WAS GOING TO REPLACE IGNITION. PLEASE PROVIDE ANY ADDITIONAL INFORMATION/ATTACHMENTS. *AK

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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

FOR AGENCY USE ONLY 920

Date Received

01 JUL -3 AM
20 JUN 2001OFFICE
DEFECTS INVESTIGATIONO_d or
r_d t
ed rt
up ltr

Reference No.

890821

OWNER INFORMATION (Type or Print)

698175

Work Number

Home Number

Do you authorize NHTSA to provide a copy of report to the manufacturer of your vehicle?
In the absence of an authorization, NHTSA WILL NOT provide your name and address to the vehicle manufacturer.☒ YES☐ NO

Signature of Owner

Date 1 / 1

VEHICLE INFORMATION

Vehicle Ident. No. (VIN) (Located at bottom of
windshield on driver's side)

1FALP6537TGK22257

Vehicle Make

FORD

Vehicle Model

CONTOUR

Vehicle Year

1996

Current Odometer Reading

53,700

Purchase Date

6/98

Dealer's Name

Mel Fawn Ford

Engine Size
(CID/CC/L)☐ Turbo
☐ Diesel
☒ Gas
☐ Fuel Injection☐ New ☒ Used

City

State

Zip Code

No Cylinders

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☐ 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

05510000

Part Name(s)

ELECTRICAL SYSTEM:IGNITION:SWITCH

Location

☒ Left
☒ Front☐ Right
☐ Rear

Failed Part(s)

☒ Original
☐ Replacement

No of Failures

Date(s) of Failure(s) 02-JUN-2001

Mileage at Failure(s)

Vehicle Speed at Failure(s)

Failed Part(s)
Available?☐ Yes ☒ NoNHTSA 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)

IGNITION FAILS TO COMPLETELY SHUT VEHICLE OFF WHEN TURNED TO OFF POSITION, AND THE KEY IS REMOVED. CONSUMER STATED THAT IT ALSO TAKES EXCESSIVE EFFORT TO INSERT OR REMOVE KEY FROM IGNITION. DEALERSHIP HAS EXAMINED VEHICLE, AND WAS GOING TO REPLACE IGNITION. PLEASE PROVIDE ANY ADDITIONAL INFORMATION/ATTACHMENTS. *AK

Suppose to take the Ford dealer the 6th of July to a dealer getting fixed not really on there the money to get it done

CONTINUE ON BACK IF NEEDED

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