



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

02-AUG-2001

Ord. or
rt. dt
pd. rt
rp. ltr

Reference No.

893276

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
1FTEX15N8PXA92887	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
☐ Manual ☐ Automatic	☒ Yes ☐ No	☐ 3-Point Belt ☐ Driverside Airbag ☐ Passengerside Airbag ☐ Motorbelt ☐ 2-Point Belt	☒ Yes ☐ No	☐ Front ☐ Rear ☐ 4-Wheel
Vehicle Type	Body Style			
☐ Car ☐ Van ☐ Minivan ☐ Other	☐ Sport Util ☐ Truck ☐ Motorcycle	☐ 2-Door ☐ 4-Door ☐ Stationwagon ☒ Pick Up Truck ☐ Other		

FAILED COMPONENT(S)/PART(S) INFORMATION

Component 08100000	Part Name(s) FUEL:FUEL SYSTEMS	Location ☐ Left ☐ Right ☐ Front ☐ Rear	Failed Part(s) ☐ Original ☐ Replacement
No of Failure	Date(s) of Failure(s) 01-AUG-2001 38500 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)

CONSUMER RECEIVED RECALL NOTICE 00V424000, AND WAS INFORMED BY LOCAL DEALERSHIP THAT VEHICLE WOULD NOT BE SERVICED UNLESS IT WAS EXPERIENCING A FUEL LEAK. PLEASE PROVIDE ANY ADDITIONAL INFORMATION/ATTACHMENTS.*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 NATIONALWIDE 1-888-DASH-2-DOT 1-888-327-4238 www.nhtsa.dot.gov/hotline		FOR AGENCY USE ONLY 920 Date Received <u>02-AUG-2001</u> RECEIVED 01 AUG 2001 10:17 OFICE DEFECTS INVESTIGATION 893276 Work Number _____ Home Number _____	
OWNER INFORMATION (Type or Print) 705002			
Do you authorize NHTSA to provide a copy of report to the manufacturer of your vehicle? ☒ YES ☐ NO In the absence of _____ name and address to the vehicle manufacturer. Signature of Owner _____ Date <u>8/12/01</u>			
VEHICLE INFORMATION			
Vehicle Ident. No. (VIN) (located at bottom of windshield on driver's side) 1FTEX15N8PXA92887		Vehicle Make FORD TRUCK	Vehicle Model F150
		Vehicle Year 1993	Current Odometer Reading 38,500
Purchase Date <u>2-25-93</u> ☒ New ☐ Used	Dealer's Name <u>Bethlehem Subaru Ford</u> City <u>Bethlehem</u> State <u>Pa</u> Zip Code <u>18018-0124</u>		Engine Size (CID/CC/L) _____ ☐ Turbo ☐ Diesel ☒ Gas ☒ Fuel Injection No Cylinders <u>8</u>
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 Ut ☐ 2-Door ☐ Van ☒ Truck ☐ 4-Door ☐ Minivan ☐ Motorcycle ☐ Stationwagon ☐ Other ☒ Pick Up Truck ☐ Other
FAILED COMPONENT(S)/PART(S) INFORMATION			
Component 08100000	Part Name(s) FUEL:FUEL SYSTEMS		Location ☐ Left ☐ Right ☒ Original ☐ Front ☐ Rear ☐ Replacement
No of Failures _____	Date(s) of Failure(s) <u>01-AUG-2001</u> Mileage at Failure(s) <u>38500</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 <u>0</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)			
CONSUMER RECEIVED RECALL NOTICE 00V424000, AND WAS INFORMED BY LOCAL DEALERSHIP THAT VEHICLE WOULD NOT BE SERVICED UNLESS IT WAS EXPERIENCING A FUEL LEAK. PLEASE PROVIDE ANY ADDITIONAL INFORMATION/ATTACHMENTS.*AK			
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 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.			

Fold to show Return Address (no stamp needed) Fasten with tape or staple and mail

INFORMATION ON TIRE FAILURE(S) (IF APPLICABLE)

TIRE IDENTIFICATION NO.*

D O T

MANUFACTURER/TIRE NAME

SIZE

* The identification number consists of 7 to 10 letters and numerals following the letters DOT. It is usually located near the rim flange on the side opposite the whitewall or on either side of a blackwall tire.

NARRATIVE DESCRIPTION (CONTINUED)

HIGHWAY TRAFFIC SAFETY ADMINISTRATION

BEING THAT IT IS A SAFETY ISSUE, I WAS CONCERNED AND MADE A PHONE CALL TO THE NATIONAL

HE THEN PUT ME ON HOLD; LATER COMING BACK AND SAYING THAT WHAT THE DEALER TOLD ME WAS RIGHT

REPLACED. THEN I EXPLAINED TO HIM HOW BETHLEHEM SUBURBAN FORD HANDLED THE SITUATION AND

AND AFTER HE RESEARCHED WHAT THE RECALL WAS, HIS FIRST RESPONSE WAS THAT IT SHOULD BE

AND TALKED TO A REPRESENTATIVE AND ASKED IF SAFETY RECALL 00557 ON MY TRUCK MUST BE REPLACED

LATER THAT MORNING I CALLED FORD MOTOR COMPANY CUSTOMER RELATIONSHIP CENTER AT 866-436-7332

PRESSURE REGULATOR IF THEY ARE FAULTY.

I SAID THAT I WAS NOT AND HIS RESPONSE WAS THAT FORD MOTORS IS ONLY REPLACING THE FUEL

MORNING. THE SERVICE CLERK AT THE DESK ASKED ME IF I WAS HAVING A PROBLEM WITH FUEL LEAKAGE.

SUBURBAN FORD AND MADE AN APPOINTMENT FOR AUGUST 2, 2001. WHEN I BROUGHT MY TRUCK IN THAT

WHEN I RECEIVED A NOTICE FROM FORD MOTOR COMPANY ON SAFETY RECALL 00557, I CALLED BETHLEHEM

U.S. Department
of Transportation

National Highway
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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
Information Management Staff NSA-10.01
400 7th Street, SW
Washington, DC 20590

NO POSTAGE
NECESSARY
IF MAILED
IN THE
UNITED STATES