



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-SEP-2001

Od_or _____
rt_dt _____
pd_rt _____
rp_lr _____

Reference No.

896794

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) (Location at bottom of windshield and driver's side)		Vehicle Make	Vehicle Model	Vehicle Year	Current Odometer Reading
1FAPP53U7XG185558		FORD	TAURUS	1999	
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	☒ Yes ☐ No	☐ Front ☐ Rear ☐ 4-Wheel	☐ Car ☐ Van ☐ Minivan ☐ Other _____
		☐ Motorbelt ☐ 2-Point Bel		☐ Sport Utl ☐ Truck ☐ Motorcycle	☐ 2-Door ☐ 4-Door ☐ Stationwagon ☐ Pick Up Truck ☐ Other _____

FAILED COMPONENT(S)/PART(S) INFORMATION

Component 10310000	Part Name(s) VISUAL SYSTEMS:WINDSHIELD WIPER	Location ☐ Left ☐ Right ☐ Front ☐ Rear	Failed Part(s) ☐ Original ☐ Replacement
No of Failure	Date(s) of Failure(s) 22-SEP-2001 48000 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 C	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)

WHILE DRIVING IN INCLEMENT WEATHER WINDSHIELD WIPERS OPERATE INTERMITTENTLY, -REDUCING VISIBILITY FOR DRIVER. NO DETERMINATION HAS BEEN MADE FOR THE CAUSE OF THIS PROBLEM. 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.



U.S. Department of Transportation
National Highway Traffic Safety Administration
Vehicle Owner's Questionnaire (VOQ)
NAT/ONWIDE 1-888-DASH-2-DOT
1-888-327-4236
www.nhtsa.dot.gov/hotline

OWNER INFORMATION (Type or Print)

716981

Reference No.

896794

Work Number

Home

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.

Signature of Owner _____ Date _____

VEHICLE INFORMATION

Vehicle Ident. No. (VIN) (Located at front of windshield or driver's side) **1FAPP53U7XG185558**
Vehicle Make **FORD**
Vehicle Model **TAURUS**
Vehicle Year **1999**
Current Odometer Reading _____

Purchase Date **May 2001**
New ☒ Used ☐

Dealer's Name **Private owner** City _____ State _____ Zip Code _____
Engine Size (CID/CC/L) **3.0** No Cylinders _____
Turbo ☐ Diesel ☐ Gas ☒ Fuel Injection ☒

Transmission Type ☒ Automatic ☐ Manual
Antilock Brakes ☒ Yes ☐ No
Restraint System ☒ 3-Point Belt ☐ 2-Point Belt ☐ Driver's Side Airbag ☒ Passenger's Side Airbag
Cruise Control ☒ Yes ☐ No
Drive Train ☒ Front ☐ Rear ☐ 4-Wheel
Vehicle Type ☒ Car ☐ Van ☐ Minivan ☐ Other
Body Style ☒ 2-Door ☐ 4-Door ☐ Station Wagon ☐ Pick Up ☐ Truck

FAILED COMPONENT(S)/PART(S) INFORMATION

Component **10310000** Part Name(s) **VISUAL SYSTEMS: WINDSHIELD WIPER**
Location ☐ Left ☐ Right ☐ Rear ☐ Front ☐ Original ☐ Replacement
No. of Failures _____ Date(s) of Failure(s) **22-SEP-2001** Mileage at Failure(s) **48000**
Vehicle Speed at Failure(s) _____
Failed Parts ☐ Failed Parts Previously

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 Failures _____
Estimated Property Damage Reported to Police _____
NHTSA ☐ Yes ☐ No

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

WHILE DRIVING IN INCLEMENT WEATHER WINDSHIELD WIPERS OPERATE INTERMITTENTLY, REDUCING VISIBILITY FOR DRIVER. NO DETERMINATION HAS BEEN MADE FOR THE CAUSE OF THIS PROBLEM. PLEASE PROVIDE ANY ADDITIONAL INFORMATION / ATTACHMENTS. *AK

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.

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)																						

TIRE IDENTIFICATION NO.*																				
D	O	T												MANUFACTURER/TIRE NAME						SIZE

MANUFACTURER/TIRE NAME

SIZE

NARRATIVE DESCRIPTION (CONTINUED)	
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NARRATIVE DESCRIPTION (CONTINUED)

The wipers would stop in this
own while in the on position.
The wipers would go on in the
off position.

Index

Discussion

1111

BUSINESS REPLY MAIL

FIRST CLASS PERMIT NO. 73173 WASHINGTON, D.C.

POSTAGE WILL BE PAID BY NAT'L 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

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