Form Approved: O.M.B. No. 2127-0008

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 1038

Date Received: 02-OCT-2001

Od_or ____ rt_dt ____ od_rt ____ up_ltr ____

Reference No. 897221

[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 ______________________ Date___/___/___

VEHICLE INFORMATION

Vehicle Ident. No. (VIN.) (Located at bottom of windshield on driver's side)	Vehicle Make	Vehicle Model	Vehicle Year	Current Odometer Readin
1FTRX18WXYNA46645	FORD TRUCK	F150	2000	

Purchase Dat ____ ☒ New ☐ Used

Dealer's Name________________________ City__________ State______ Zip Code________

Engine Size (CID/CC/L ____ No Cylinders ____

☐ Turbo ☐ Diesel ☐ Gas ☐ Fuel Injectio

Transmission Type	Antilock Brakes	Restraint System	Cruise Contro	Drive Trai	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 Ult ☐ Van ☐ Truck ☐ Minivan ☐ Motorcycle ☐ Other______	☐ 2-Door ☐ 4-Door ☐ Stationwagon ☒ Pick Up Truck ☐ Other______

FAILED COMPONENT(S)/PART(S) INFORMATION

Component	Part Name(s	Location	Failed Part(s
12112200	INTERIOR SYSTEMS:PASSIVE RESTRAINT:AIR BAG:SIDE DOOR:D	☐ Left ☐ Right ☐ Front ☐ Rear	☐ Original ☐ Replacement

No of Failure	Date(s) of Failure(s) / Mileage at Failure(s)	Failed Part(s)	NHTSA Previously
	01-OCT-2001 26	☐ Yes ☐ No	☐ 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	Fire	Number of Persons Injured	Number of Fatalitie	Estimated Property Damag	Reported to Polic
☒ Yes ☐ No	☐ Yes ☒ No				☐ Yes ☒ No

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

CONSUMER WAS INVOLVED IN A FRONT END COLLISION THAT RESULTED IN DRIVER'S SIDE AIR BAG FAILING TO DEPLOY. DEALER HAS BEEN CONTACTED. PLEASE PROVIDE FURTHER DETAILS.*AK

CONTINUE ON BACK IF NEEDED

Form Approved: O.M.B. No. 2127 0008

U.S. Department of Transportation
National 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 1038

Date Received: 02-OCT-2001

Od_or / rt_dt / od_rt / up_ltr

Reference No. 897221

OWNER INFORMATION (Type or Print)

[redacted] 718513

Work Number
Home Nu [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 Owne[redacted] Date 10/30/01

VEHICLE INFORMATION

Vehicle Ident. No. (VIN) (Located at bottom of windshield on driver's side)	Vehicle Make	Vehicle Model	Vehicle Year	Current Odometer Reading
1FTRX18WXYNA46645	FORD TRUCK	F150	2000	

Purchase Date: ☒ New ☐ Used

Dealer's Name: Carl Black Ford
City: Summerville State: GA Zip Code: ______

Engine Size (CID/CC/L) ______
No Cylinders: 8

☐ Turbo ☐ Diesel ☐ Gas ☒ Fuel Injection

Transmission Type: ☒ Manual ☐ Automatic

Antilock Brakes: ☐ Yes ☒ No

Restraint System: ☐ 3-Point Belt ☐ Driverside Airbag ☐ Passengerside Airbag ☐ Motorbelt ☐ 2-Point Belt

Cruise Control: ☒ Yes ☐ No

Drive Train: ☐ Front ☐ Rear ☐ 4-Wheel

Vehicle Type: ☐ Car ☐ Van ☐ Minivan ☐ Other ☐ Sport Util ☒ Truck ☐ Motorcycle

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

FAILED COMPONENT(S)/PART(S) INFORMATION

Component	Part Name(s)	Location	Failed Part(s)
12112200	INTERIOR SYSTEMS:PASSIVE RESTRAINT:AIR BAG:SIDE DOOR:	☒ Left ☒ Front ☐ Right ☐ Rear	☐ Original ☐ Replacement

No of Failures:

Date(s) of Failure(s): 01-OCT-2001
Mileage at Failure(s): 25
Vehicle Speed 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	Fire	Number of Persons Injured	Number of Fatalities	Estimated Property Damage	Reported to Police
☒ Yes ☐ No	☐ Yes ☒ No	0	0	2100.00 to our truck & other vehicle	☒ Yes ☐ No

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

CONSUMER WAS INVOLVED IN A FRONT END COLLISION THAT RESULTED IN DRIVER'S SIDE AIR BAG FAILING TO DEPLOY. DEALER HAS BEEN CONTACTED. PLEASE PROVIDE FURTHER DETAILS.*AK

When you are using the brakes they are suppose to be Anti-lock ~~brak~~ brakes, in the event of the crash all 4 brakes locked. I think Carl Black should be responsible for damages and have a very poor attitude on their product that are suppose to be top quality.

CONTINUE ON BACK IF NEEDED

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.*	MANUFACTURER/TIRE NAME	SIZE
D O T		

* 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)

Michael McCarty was traveling south on 337 Hwy when a lady driving a Chev. Tahoe stopped in front of him Causing him to hit her in the rear. He was giving a citation for following to close for $128.00 And had to pay $500.00 deductable for a vechiley that when was involved in a crash did not act right on impact. The man over the service dept. at Carl Black Ford, said if it wasn't hit head on the air bags didn't work. I have 2 small children and if they had of been in an accident and I wasn't hit head on & the air bags didn't deploy. You tell me. I think this truck doesn't operate correctly I have taken it for a squeek in the front driver side wheel. And they couldn't hear it. And didn't log it on their computer. Plus never give me a copy of anything.

U.S. G.P.O.: 199_—___-___/_____

U.S. Department of Transportation

National Highway Traffic Safety Administration

400 Seventh St., S.W.
Washington, D.C. 20590

Official Business
Penalty for Private Use $300

NO POSTAGE NECESSARY IF MAILED IN THE UNITED STATES

BUSINESS REPLY MAIL

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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
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Washington, DC 20590

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