



U.S. Department
of Transportation
**National Highway
Traffic Safety
Administration**

Auto Safety Hotline

Vehicle Owner's Questionnaire

NATIONWIDE 1-800-424-8393

DC METRO AREA (202) 366-0123

INTERNET: <http://www.nhtsa.dot.gov>

Use a No. 2 pencil or a blue
or black ink pen only.

CORRECT MARK: ●

FOR AGENCY USE ONLY

Date Received

7/17/01

Reference No.

Clerk

Aid

Adm.

Cp-It

OWNER INFORMATION (Type or Print)

DAYTIME TELEPHONE NUMBER

ZIP CODE + 4

AREA CODE

manufacturer of your vehicle?

SIGNATURE OF OWNER

VEHICLE INFORMATION

VEHICLE IDENT. NO. (VIN) (Located at bottom of windshield on driver's side)

VEHICLE MAKE

VEHICLE MODEL

MANUFACTURE DATE

MODEL YEAR

1FM4Y404121KE31793

Ford
Escape

2001

2001

VEHICLE MANUFACTURER

- ☐ BMW ☒ Ford ☐ Honda ☐ Nissan ☐ Subaru ☐ Volvo ☐ Other
☐ Daihatsu/Chrysler ☐ General Motors ☐ Hyundai ☐ Saab ☐ Toyota ☐ VW

PURCHASE DATE

12-00

☒ New
☐ Used

DEALER'S NAME

Bill Clough Ford

CITY

Windsor

STATE

NC

ZIP CODE

27983

ENGINE SIZE

GDI/DOHC

NO. CYLINDERS

6

FUEL SYSTEM

- ☐ Turbo
☒ Fuel Injection

FUEL TYPE

- ☐ Diesel
☒ Gas

TRANSMISSION TYPE

- ☐ Manual
☒ Automatic

ANTILOCK BRAKES

- ☒ Yes
☐ No

RESTRAINT SYSTEM

- ☒ Driverside Airbag ☐ 2-Point Belt
☒ Passengerside Airbag ☐ Motorboat
☐ 3-Point Belt

CRUISE CONTROL

- ☒ Yes
☐ No

DRIVETRAIN

- ☐ Front ☒ 4-Wheel
☐ Rear

VEHICLE TYPE

- ☐ Car ☐ Minivan ☐ Truck ☐ Other
☐ Van ☒ Sport Utility ☐ Motorcycle

DOORS

- ☐ 2-Door
☒ 4-Door

BODY STYLE

- ☒ SUV ☐ Hatchback ☐ Sedan
☐ Pick Up Truck ☐ Stationwagon

FAILED COMPONENT(S)/PART(S) INFORMATION

COMPONENT

- ☐ Child Seat
☐ Electrical Lights & Alarms
☐ Engine & Cooling System
☐ Equipment
☐ Fuel System, Exhaust
☐ Heater, Defrost, Ventilation
☐ Interior
☐ Parking Brake
☐ Power Train
☐ Service Brakes
☐ Steering
☐ Structure
☐ Suspension
☐ Visual Systems
☒ Other TIRES

NO. OF FAILURES

1 2 3 4 5 6 7 8 9
10 11 12 13 14 15 16 17 18 19

INCIDENT DATE 2 bad tires

5-01 + 6-30-01

MILEAGE AT INCIDENT

at 10,000 / 13,500

VEHICLE SPEED AT INCIDENT

N/A

FAILED PART(S)

- ☒ Original
☐ Replacement

To report defective or failed tires provide the following: Tire
Brand, Tire Name, Tire Size (include all number and letters).

TIRE NAME Wilderness

Firestone HT

COMPLETE TIRE SIZE

P235/70/R16

TIRE BRAND

- ☐ BF Goodrich
☐ Cooper
☒ Firestone
☐ Goodyear
☐ Kelly Springfield
☐ Michelin
☐ Yokohama
☐ Other

Wilderness HT

HANDICAPPED ADAPTIVE

- ☐ Yes ☒ No

FAILED PART(S) AVAILABLE?

- ☐ Yes ☐ No 1 yes / 1 no

NHTSA PREVIOUSLY CONTACTED?

- ☐ Yes ☒ No

APPLICABLE 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

NUMBER OF PERSONS INJURED

1 2 3 4 5 6 7 8 9
10 11 12 13 14 15 16 17 18 19

FIRE

- ☐ Yes
☐ No

NUMBER OF FATALITIES

1 2 3 4 5 6 7 8 9
10 11 12 13 14 15 16 17 18 19

CAUSE OF INCIDENT

- ☐ Wear/Corrosion/Rust
☐ Weak/Poor Fit/Loose
☐ Cut/Torn
☐ Disconnect/Fel Off
☐ Erratic/Poor Performance
☐ Excessive Effort

- ☐ Nutsy
☐ Leaks
☐ Short
☐ Locks/Sticks/Grabs
☐ Stability/Vibration
☐ Broken

RESULT OF INCIDENT

- ☐ Explosion/Fire
☐ Loss of Control
☐ Poor Visibility
☐ Inadvertent Start
☐ Rollover
☐ Skids
☐ Sudden Acceleration

PLEASE DO NOT WRITE IN THIS AREA



03228

NARRATIVE DESCRIPTION OF INCIDENT(S), TAILLIGHT(S),
crash(es), location(s), and injury(ies). Include
additional accidents if applicable.

DA 5-32-01 a tire was
replaced. Front driver's side.

On 6-30-01 another
tire is spilling. Passengers
near tire - the tire
had not been replaced yet.

The first tire replaced was
pre-rated - I have been told
not to pay this bill yet.
I do not feel that
the should have to pay
for 2 tires that have
gone bad. We bought the
vehicle new in December
of 2000.

I feel very unsure driving
our new vehicle - wondering
if these tires are going to
cause an accident to my
family - either by serious body
injury or death.

Continue on additional pages if necessary. *See attached sheet*

Describe any additional incidents. (Include date and mileage)

The Privacy Act of 1974 (Public Law 93-579) (15 U.S.C. 552) requires that
information to which it applies be released in the National Highway Traffic Safety Administration.
You are under no obligation to respond to this questionnaire. Your
responses may be used to assist the NHTSA in determining whether a manufacturer
should take appropriate action to correct a safety defect. If you NHTSA, procedures with
administrative enforcement or litigation against a manufacturer, your responses, or a
statistical summary thereof, may be used in support of the agency's action.

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HS Form 350 (Rev. 8/89)

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IN THE
UNITED STATES



BUSINESS REPLY MAIL
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U.S. Department of Transportation
National Highway Traffic Safety Administration
Office of Defects Investigation, NSA-10.01
400 7th Street, SW
Washington, DC 20590

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

Complete and return or place in your car manual for future use

VEHICLE OWNER'S

QUESTIONNAIRE (V00Q)

DOT AUTO SAFETY HOTLINE

TO REPORT VEHICLE SAFETY DEFECTS
COMPLETE THIS FORM
OR

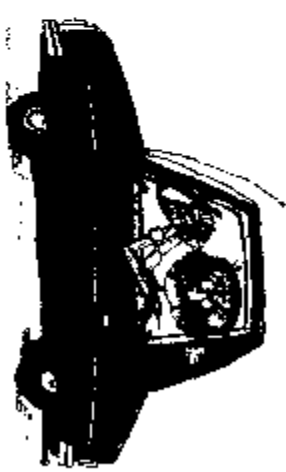
DASH 2 DOT

and dial toll free at

1-888-DASH-2-DOT

1-888-327-4236

DOT Auto Safety Hotline
(DASH) 2 DOT



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