



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.nhtea.dot.gov>

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

CORRECT MARK: ●

FOR AGENCY USE ONLY

Date Reported: 9/26/01 Order: _____
 Release No.: _____ Incident: _____
 _____ Date: _____
 _____ State: _____
 _____ Title: _____

OWNER INFORMATION (Type or Print)

DAYTIME TELEPHONE NUMBER

SIGNATURE OF OWNER

DATE

VEHICLE INFORMATION

VEHICLE IDENT. NO. (VIN) (Located at bottom of windshield on driver's side) 2FALP73W45X198237		VEHICLE MAKE FORD	VEHICLE MODEL CROWN VICTORIA	MANUFACTURE DATE 06/1995	MODEL YEAR 1995	
VEHICLE MANUFACTURER <input type="radio"/> BMW <input checked="" type="radio"/> Ford <input type="radio"/> Honda <input type="radio"/> Nissan <input type="radio"/> Subaru <input type="radio"/> Volvo <input type="radio"/> Other _____ <input type="radio"/> Daimler/Chrysler <input type="radio"/> General Motors <input type="radio"/> Hyundai <input type="radio"/> Saab <input type="radio"/> Toyota <input type="radio"/> VW						
PURCHASE DATE 8-20-01	<input type="radio"/> New <input checked="" type="radio"/> Used	DEALER'S NAME WEBB FORD	CITY HIGHLAND	STATE IN.	ZIP CODE	
ENGINE SIZE CID/CC 4.6	FUEL SYSTEM <input type="radio"/> Turbo <input checked="" type="radio"/> Fuel Injection	FUEL TYPE <input type="radio"/> Diesel <input checked="" type="radio"/> Gas	TRANSMISSION TYPE <input type="radio"/> Manual <input checked="" type="radio"/> Automatic	ANTILOCK BRAKES <input type="radio"/> Yes <input checked="" type="radio"/> No	RESTRAINT SYSTEM <input checked="" type="radio"/> Driver-side Airbag <input checked="" type="radio"/> Passengerside Airbag <input checked="" type="radio"/> 3-Point Bel. <input type="radio"/> 2-Point Belt <input type="radio"/> No Roll-over	CRUISE CONTROL <input checked="" type="radio"/> Yes <input type="radio"/> No
NO. CYLINDERS 8	DRIVETRAIN <input type="radio"/> Front <input checked="" type="radio"/> Rear	VEHICLE TYPE <input checked="" type="radio"/> Car <input type="radio"/> Van <input type="radio"/> Minivan <input type="radio"/> Sport Utility <input type="radio"/> Truck <input type="radio"/> Motorcyclb	DOORS <input type="radio"/> 2-Door <input checked="" type="radio"/> 4-Door	BODY STYLE <input type="radio"/> Hatchback <input type="radio"/> Pick Up Truck <input checked="" type="radio"/> Sedan <input type="radio"/> Station wagon		

FAILED COMPONENT(S)/PART(S) INFORMATION

COMPONENT <input type="radio"/> Child Seat <input type="radio"/> Electrical Lights & Alarms <input type="radio"/> Engine & Cooling System <input type="radio"/> Equipment <input type="radio"/> Fuel System, Exhaust <input type="radio"/> Heater, Defrost, Ventilation <input type="radio"/> Interior <input type="radio"/> Parking Brake <input type="radio"/> Power Train <input type="radio"/> Service Brakes <input type="radio"/> Steering <input type="radio"/> Structure <input type="radio"/> Suspension <input type="radio"/> Visual Systems <input checked="" type="radio"/> Other SEAT BELT LATCH MECHANISM	NO. OF FAILURES 1	To report defective or failed tires provide the following: Tire Brand, Tire Name, Tire Size (include all number and letters).	
	INCIDENT DATE EXISTED AT PURCHASE DATE	TIRE NAME	COMPLETE TIRE SIZE
	MILEAGE AT INCIDENT 46,622 AT PURCHASE	TIRE BRAND	
	VEHICLE SPEED AT INCIDENT N/A		
HANDICAPPED ADAPTIVE <input type="radio"/> Yes <input checked="" type="radio"/> No	FAILED PART(S) AVAILABLE? <input checked="" type="radio"/> Yes <input type="radio"/> No	NHTSA PREVIOUSLY CONTACTED? <input type="radio"/> Yes <input checked="" type="radio"/> 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 <input type="radio"/> Yes <input type="radio"/> No	NUMBER OF PERSONS INJURED 0	CAUSE OF INCIDENT <input type="radio"/> Wear/Corroded/Rust <input type="radio"/> Weak/Poor Fit/Loose <input type="radio"/> Cut/Torn <input type="radio"/> Disconnect/Fel Off <input type="radio"/> Erratic/Poor Performance <input type="radio"/> Excessive Effort <input type="radio"/> Noisy <input type="radio"/> Leaks <input type="radio"/> Short <input type="radio"/> Locks/Sinks/Grabs <input type="radio"/> Stability/Vibration <input type="radio"/> Broken	RESULT OF INCIDENT <input type="radio"/> Ejection/Fire <input type="radio"/> Loss of Control <input type="radio"/> Poor Visibility <input type="radio"/> Inadvertent Start <input type="radio"/> Rollover <input type="radio"/> Stalls <input type="radio"/> Sudden Acceleration
	FIRE <input type="radio"/> Yes <input type="radio"/> No	NUMBER OF FATALITIES 0		

PLEASE DO NOT WRITE IN THIS AREA



03979

Narrative description of incident(s), failure(s), crash(es), location(s), and injury(es). Include additional accidents if applicable.

I'M AWARE OF SEAT BELT LATCH FAILURES (DRIVERS SIDE ONLY) ON SEVERAL VEHICLES.

'86 MERCURY COUGER

'96 FORD WIND STAR

'97 FORD EXPLORER

'99 FORD EXPLORER

'90 FORD RANGER

I OWNED THE COUGER

MY WIFE OWNS BOTH THE EXPLORERS

THE WIND STAR WAS AT A DEALERSHIP FOR SALE!

THE RANGER IS OWNED BY MY BROTHER-IN-LAW

MY '95 CROWN VICTORIA WAS ON

THE DEALERSHIP LOT FOR SALE WITH THE BROKEN LATCH.

AS OF THIS WRITING, THE LATCH WAS IS ON ORDER AT NO COST.

Continue on additional page if necessary.

Describe any additional incidents. (Include date and mileage)

The Privacy Act of 1974—Public Law 93-502 This information is requested pursuant to authority vested in the National Highway Traffic Safety Act and subsequent amendments. You do not have to disclose information in response to this questionnaire. Your response may be used to assist the NHTSA in determining whether a manufacturer should take appropriate action to correct safety defects. If the NHTSA proceeds with an administrative or litigation against a manufacturer, your response, or a partial summary thereof, may be used in support of the agency's action.

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HS Form 350 (Rev. 8/99)

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IN THE
UNITED STATES



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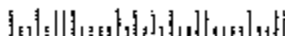
U.S. Department of Transportation
National Highway Traffic Safety Administration
Office of Defects Investigation, NSA-10.01
400 7th Street, SW
Washington, DC 20590

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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www.nhtsa.dot.gov/hotline