



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

DOT Auto Safety Hotline

Vehicle Owner's Questionnaire

To Report Vehicle Safety Defects

1-888-DASH-2-DOT

(1-888-327-4236)

INTERNET: www.nhtsa.dot.gov/hotline

FOR AGENCY USE ONLY 1367

Date Received

2003 SEP 15 PM 2:14

15-AUG-2003

Repository ☐

Reference No.
10034042

OWNER INFORMATION (Type or Print)

Name

Address

City

SILVER SPRING

State MD

Zip Code

Daytime Telephone Number

E-mail Address

Evening Telephone Number

Do you authorize NHTSA to provide a copy of this report to the manufacturer of your vehicle? ☐ YES ☒ NO

In the absence of an authorization, NHTSA WILL NOT provide your name or address to the vehicle manufacturer.

Signature of Owner

Date

VEHICLE INFORMATION

17 digit Vehicle Identification Number Located at bottom of windshield on driver's side

1FAFP33P31W179882

Make

FORD

Model

FOCUS

Model Year

2001

Date Purchased

01/04/2003

Dealer's Name and Telephone Number

ENTERPRISE CAR SALES

Engine

No. Cylinders

4

Fuel Type:

GAS

Original Owner

Dealer's City

State

Zip Code

Transmission Type

☐ Antilock Brakes

Powertrain

☐ Cruise Control

Vehicle Component Code

103000 POWER TRAIN: AUTOMATIC TRANSMISSION

Multiple Failure

2/3

5/3/03

7/04/03

7/29/03

FAILED COMPONENT(S)/PART(S) INFORMATION

Incident Date(s)

Failure Mileage

42000

Failure Speed

ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A TIRE FAILURE

Tire Make

The Model (Name or Number)

The Size (Example P215/65R15)

DOT No. (Example: DOT415ABC036)

☐ Original Equipment

☐ Prior Repair

Failure Location:

Tire Component Code

Tire Failure Type

ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A CHILD SEAT FAILURE

Make:

Date Manufactured:

Model No./Name:

Seat Type:

Installation System:

Child Seat Component Code:

Failed Part:

APPLICABLE INCIDENT INFORMATION

(Please describe in detail the incident(s), failure(s), crash(es), and injury(ies).)

Crash

☐ Yes ☒ No

Fire

☐ Yes ☒ No

Number of Persons Injured

Number of Deaths

Reported to Police

N

Narrative Description of Incident(s), Crash(es), and Injury(ies).

Please describe (1) events leading up to the failure, (2) failure and its consequences, and (3) what was done to correct the failure (e.g., parts repaired or replaced (and if old part is available)).

WHEN VEHICLE IS IN REVERSE AND THE BRAKE PEDAL IS DEPRESSED VEHICLE STALLS. DEALERSHIP HAS SERVICED THE VEHICLE SEVERAL TIMES FOR THIS FAILURE, BUT THE CAUSE OF THE FAILURE IS UNDETERMINED. ~~ALL STALLING INCIDENTS OCCURRED WHEN GAS TANK WAS 1/4 FULL OR LESS~~

Dealership REFUSED to EVALUATE PROBLEM BECAUSE CAR STARTED AFTER BEING TOWED to dealer. All stalling incidents occurred when gas tank was 1/4 full or less.

Include, if available: Police/Fire Department Report, Photos, and Repair Invoices.

ATTACH ADDITIONAL SHEETS IF NECESSARY

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.

Narrative Description of Incident(s), Failure(s), Crash(es), and Injury(ies)

All Stallings occurred when started ~~the~~ after sitting overnight and it was the first start of the day.
5/3 - AAA started in approx 15 min. after checking, putting in neutral, rolling backward.
7/2 - AAA checked and tried to start approx. 45 min. towed to dealer after car started immediately. Dealer 'REFUSED' to check car.
7/29 - Stalled - I tried to start ONCE PER DAY for 6 days. It started ON the 6 day.

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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



BUSINESS REPLY MAIL

FIRST CLASS PERMIT NO 72172 WASHINGTON, D.C.

POSTAGE WILL BE PAID BY NATL. HWY. TRAFFIC SAFETY ADMIN.



NO POSTAGE
NECESSARY
IF MAILED
IN THE
UNITED STATES
START

U.S. Department of Transportation
National Highway Traffic Safety Administration
Office of Defects Investigation, NVS-216
400 7th Street, SW
Washington, DC 20590



U.S. Department of Transportation
National Highway Traffic Safety
Administration
http://www.nhtsa.dot.gov/nhtsa



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and dial toll free at

DASH2DOT

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COMPLETE THIS FORM

DOT AUTO SAFETY HOTLINE

QUESTIONNAIRE

**VEHICLE
OWNER'S**