



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

(1-888-327-4238)

INTERNET: www.nhtsa.dot.gov/hotline

FOR AGENCY USE ONLY 100079

Date Received

Repository ☐

Reference No.
10042185

PH 02-OCT-2003

2003 DEC 10

OWNER INFORMATION (Type or Print)

Name

Address

City

DUNDEE

State

OR

Zip Code

Daytime Telephone Number

E-mail Address

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 1/1

VEHICLE INFORMATION

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

Make

FORD

Model

ESCAPE

Model Year

2001

VIN# 1FMCU04191KAG9002

Date Purchased

2/28/01

Dealer's Name and Telephone Number

Joe Wally Ford 509-663-2411 (?)

Engine:

No. Cylinders

6

Fuel Type:

gas

Original Owner

☒

Dealer's City

Wenatchee

State

WA

Zip Code

98801

Transmission Type

Auto

☒ Antilock Brakes

Powertrain

☒ Cruise Control

Vehicle Component Code

061000 ENGINE AND ENGINE COOLING: ENGINE

Multiple Failure: 1

FAILED COMPONENT(S)/PART(S) INFORMATION

Incident Date(s)

02-OCT-2003

Failure Mileage

231K

Failure Speed

40 MPH

ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A TIRE FAILURE

Tire Make

Tire Model (Name or Number)

Tire Size (Example P215/65R15)

DOT No. (Example: DOTM15ABC038)

☐ 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

1

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; i.e. parts repaired or replaced (and if old part is available).

WHILE DRIVING AT ANY SPEED AND WITHOUT WARNING VEHICLE WOULD STALL, CAUSING CONSUMER TO PULL OVER. CONSUMER STATED WENT INTO NHTSA WEB SITE AND FOUND SEVERAL OTHER COMPLAINTS ON THIS ISSUE. *AK

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

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.