



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 100192

Date Received

2005-MAR-28

Repository

Reference No.
10115348

OWNER INFORMATION (Type or Print)

Name [REDACTED]
Address [REDACTED]
City CLARKSTON State MI Zip Code [REDACTED]

Daytime Telephone Number [REDACTED] E-mail Address [REDACTED]
Evening Telephone Number [REDACTED]

Do you authorize NHTSA to provide a copy of this report to the manufacturer of your vehicle? YES NO
In the absence of an [REDACTED] NOT provide your name or address to the vehicle manufacturer.
Signature of Owner [REDACTED] Date 3/26/05

VEHICLE INFORMATION

17 digit Vehicle Identification Number Located at bottom of windshield on driver's side: 1FMYUD4115A [REDACTED]
Make: FORD Model: ESCAPE Year: 2006
Date Purchased: 5-4-04 LEASED Dealer's Name and Telephone Number: SUBURBAN FORD OF WATERFORD 248-674-4781
Original Owner: Dealer's City: WATERFORD State: MI Zip Code: 48327 Engine: No. Cylinders: 6 Fuel Type: Gas
Transmission Type: AUTOMATIC Antilock Brakes Cruise Control Powertrain: 4-WHEEL DRIVE Vehicle Component Code: 141000 AIR BAGS:FRONTAL Multiple Failures: 1

FAILED COMPONENT(S)/PART(S) INFORMATION

Incident Date(s): 12-MAR-2005 Failure Mileage: -0000-12000 Failure Speed: 65 AIR BAGS

ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A TIRE FAILURE

Tire Make: [REDACTED] Tire Model (Name or Number): [REDACTED] Tire Size (Example P216/66R15): [REDACTED]
DOT No. (Example: DOTM15AB036): [REDACTED] Original Equipment Prior Repair Failure Location: [REDACTED]
Tire Component Code: [REDACTED] Tire Failure Type: [REDACTED]

ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A CHILD SEAT FAILURE

Make: [REDACTED] Date Manufactured: [REDACTED] Model No./Name: [REDACTED]
Seat Type: [REDACTED] Installation System: [REDACTED]
Child Seat Component Code: [REDACTED] Failed Part: [REDACTED]

APPLICABLE INCIDENT INFORMATION

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

Crash: Yes No Fine: Yes No Number of Persons Injured: 0 Number of Deaths: 0 Reported to Police: Y

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 APPROXIMATELY 65 MPH DRIVER WAS CHANGING LANES AND HIT A SHEET OF BLACK ICE. VEHICLE BEGAN TO SPIN OUT OF CONTROL AND HIT THE GUARD RAIL HEAD ON. UPON IMPACT, UPON IMPACT, FRONTAL AIR BAGS FAILED TO DEPLOY. *AK

THE 2005 FORD ESCAPE WAS TOTLED OUT. THERE WAS OVER \$20,000 WORTH OF DAMAGE.

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

ATTACH ADDITIONAL SHEETS IF NECESSARY.

The Privacy Act of 1974 - Public Law 93-578 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.