



DOT Auto Safety Hotline

FOR AGENCY USE ONLY 100192

U.S. Department
of Transportation

Vehicle Owner's Questionnaire

To Report Vehicle Safety Defects

National Highway
Traffic Safety
Administration

1-888-DASH-2-DOT

(1-888-327-4236)

INTERNET: www.nhtsa.dot.gov/hotline

Date Received

Repository ☐Reference No.
10117831

OWNER INFORMATION (Type or Print)

Name

Address

City

SHERMAN

State TX

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?
In the absence of an authorization, NHTSA WILL NOT provide your name or address to the vehicle manufacturer. ☐ YES ☒ NO

Signature of Owner

Date 1/1

VEHICLE INFORMATION

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

Make
FORDModel
FOCUSModel Year
2002

Date Purchased

Dealer's Name and Telephone Number

Engine:

No. Cylinders

Fuel Type:

Gas

Original Owner

☒

Dealer's City

State

Zip Code

Transmission Type

AUTOMATIC

☒ Antilock Brakes☒ Cruise Control

Powertrain

FRONT WHEEL DRIVE

Vehicle Component Code

181000 VEHICLE SPEED CONTROL ACCELERATOR PEDAL

Multiple Failure:]

FAILED COMPONENT(S)/PART(S) INFORMATION

Incident Date(s)

75-FEB-2004

Failure Mileage

3000

Failure Speed

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: DOTM15ABC036)

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

VEHICLE EXPERIENCED SUDDEN ACCELERATION. WHILE APPROACHING A STOP SIGN DRIVER BEGAN TO SLOW DOWN, APPLIED THE BRAKES, AND VEHICLE SUDDENLY SURGED FORWARD. DRIVER HAD BOTH FEET ON THE BRAKES. DRIVER HAS TO TURN OFF THE ENGINE TO GET THE VEHICLE TO SLOW DOWN TO A STOP. *AK

I waited to send this back to see if Ford would or could fix the problems. The car also makes suddens jerks after you reach about 55 mph or faster.

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.