



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 100748

Date Received

2005 SEP 29 AM 4:01
01-SEP-2005

Repository ☐

Reference No.
10135047

OWNER INFORMATION (Type or Print)

Name XXXXXXXXXX
Address XXXXXXXXXX
City SPENDALE State NC Zip Code XXXXXX

Daytime Telephone Number XXXXXXXXXX E-mail Address XXXXXXXXXX
Evening Telephone Number XXXXXXXXXX

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 XXXXXXXXXX Date 9/15/2005

VEHICLE INFORMATION

17 digit Vehicle Identification Number Located at bottom of windshield on driver's side
1EATP6 XXXXXXXXXX Make FORD Model TAURUS Model Year 1999

Date Purchased XXXXXXXXXX Dealer's Name and Telephone Number XXXXXXXXXX Engine: No: Cylinders 8 Fuel Type: Gas
Original Owner ☐ Dealer's City XXXXXXXXXX State XXXXXX Zip Code XXXXXX

Transmission Type ☒ Automatic Brakes ☒ Antilock Brakes Powertrain FRONT WHEEL DRIVE
Vehicle Component Code 036000 SERVICE BRAKES, HYDRAULIC; ANTILOCK
Multiple Failure: 1

FAILED COMPONENT(S)/PART(S) INFORMATION

Incident Date(s) 26-AUG-2005 Failure Mileage 66000 Failure Speed XXXXXXXXXX

ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A TIRE FAILURE

Tire Make XXXXXXXXXX Tire Model (Name or Number) XXXXXXXXXX Tire Size (Example P215/65R15) XXXXXXXXXX
DOT No. (Example: DOTM19ABC036) ☐ Original Equipment ☐ Prior Repair Failure Location: XXXXXXXXXX
Tire Component Code XXXXXXXXXX Tire Failure Type XXXXXXXXXX

ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A CHILD SEAT FAILURE

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

APPLICABLE INCIDENT INFORMATION

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

Crash ☐ Yes ☒ No Fire ☐ Yes ☒ No Number of Persons Injured XXXXXXXXXX Number of Deaths XXXXXXXXXX Reported to Police XXXXXXXXXX

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;
La, parts repaired or replaced (and if old part is available).

DT: THE BRAKE LINES TUBING RUSTED FROM THE OUTSIDE. I HAD ONE POP AND LOST THE BRAKES. HAD TO TAKE A SECTION OUT. TALKED TO DEALER, THEY SAID NOTHING THEY COULD DO. THIS HAPPENED ON AUGUST 26, 2005. WAS PULLING IT INTO THE SHED CHANGED THE OIL AND THE BRAKE PEDAL WENT ALL THE WAY TO THE FLOOR. *AK

REPLACED TUBE ASSY. F8DZ-2C287/AA, F6DZ-2L568/AA
F8DZ-2L569/AA

REPLACED

FACTORY PARTS TO PREVENT FURTHER FAILURE

OLD PARTS AVAILABLE

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.