



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 100148

Date Received

Repository ☐

14-OCT-2005

Reference No.  
10139675

**OWNER INFORMATION (Type or Print)**

Name

Address

City

PONTIAC

State

MI

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

Signature of Owner

☒ YES

☐ NO

Date 11/4/05

**VEHICLE INFORMATION**

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

1F1CR14A9TF

Make

FORD

Model

RANGER

Model Year

1996

Date Purchased

11-JUL-02

Dealer's Name and Telephone Number

Engine:

No: Cylinders 4

Fuel Type:

Gas

Original Owner

Dealer's City

State

Zip Code

Transmission Type

MANUAL

☒

Antilock Brakes

☒

Cruise Control

Powertrain

REAR WHEEL DRIVE

Vehicle Component Code

125000 EXTERIOR LIGHTING: BRAKE LIGHTS

Multiple Failure: 1

**FAILED COMPONENT(S)/PART(S) INFORMATION**

Incident Date(s)

11-JUL-2005

Failure Mileage

133000

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: DOTM19ABC036)

☐ 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

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).

DT: ON JULY 10, 2005 THE CONTACT'S VEHICLE WAS INVOLVED IN AN ACCIDENT. WAS SITTING AT A RED LIGHT WITH THE CAR OUT OF GEAR. THE BAKES WERE NOT PRESSED. BECAUSE THERE WERE NO BRAKE LIGHTS ILLUMINATING THE VEHICLE WAS HIT FROM BEHIND. THE CONTACT FELT THAT VEHICLES SHOULD BE EQUIPPED WITH BRAKE LIGHTS THAT STAY ON WHILE THE VEHICLE WAS NOT MOVING. THIS WAS A SAFETY DEFECT IN ALL MANUAL TRANSMISSION VEHICLES. THE VEHICLE SUSTAINED DAMAGE TO THE REAR BUMPER AND DECK. THERE WAS NO POLICE REPORT TAKEN. THE TWO VEHICLE OPERATORS ONLY EXCHANGED PHONE NUMBERS. THE VEHICLE HAS NOT BEEN REPAIRED AT THIS TIME. THERE WERE NO INJURIES SUSTAINED BY THE VEHICLE OWNER OR THE OPERATOR OF THE OTHER VEHICLE. \*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.

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

My accident has been a concern as a class action. The appearance of no brake lights for a manual transmission vehicle that is in neutral should as well represent a traffic safety issue for vehicles with automatic transmissions as well. When a motorist is stopped and puts the car in neutral or park with the engine running, the brake lights should be on to advise motorists behind him that he is in the car. Observe and advise.

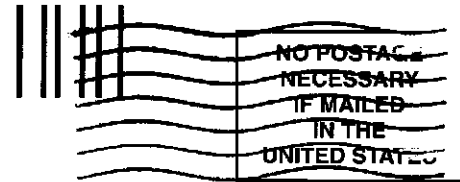
NECESSARY

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 73173 WASHINGTON, D.C.

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

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



**VEHICLE  
OWNER'S**

**QUESTIONNAIRE**

**DOT AUTO SAFETY HOTLINE**

**TO REPORT VEHICLE SAFETY DEFECTS  
COMPLETE THIS FORM**

**OR**

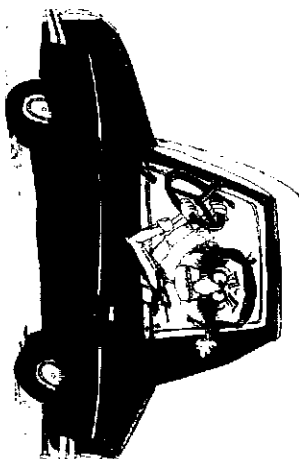
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