



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

07-AUG-2007 12:38

Reference No. 10198713

OWNER INFORMATION (Type or Print)

Name [REDACTED]

Address [REDACTED]

City BALTIMORE

State MD

Zip Code [REDACTED]

Daytime Telephone Number [REDACTED]

E-mail Address

Evening Telephone Number

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 address to the vehicle manufacturer.

Signature of Owner [REDACTED] Date 8/7/07

VEHICLE INFORMATION

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

1ZVFT80N96 [REDACTED]

Make FORD

Model MUSTANG

Model Year 2006

Date Purchased 01-AUG-05

Dealer's Name and Telephone Number FORD BELL FORD

Engine: No: Cylinders 6

Fuel Type: Gas

Original Owner

Dealer's City GLEN FENNIE

State MD

Zip Code

Transmission Type MANUAL

Antilock Brakes Cruise Control

Powertrain REAR WHEEL DRIVE

Vehicle Component Code 180000 VEHICLE SPEED CONTROL

Multiple Failure: 1

FAILED COMPONENT(S)/PART(S) INFORMATION

Incident Date(s) 05-AUG-2007

Failure Mileage 15000

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 1

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).

TL*THE CONTACT OWNS A 2006 FORD MUSTANG. THE CONTACT WAS PARKING THE VEHICLE WITH ONE FOOT ON THE CLUTCH AND THE OTHER ON THE BRAKE PEDAL. AS SHE LIFTED HER FOOT OFF THE BRAKE PEDAL, THE TIRES BEGAN TO SCREECH AND THE VEHICLE UNEXPECTEDLY SURGED FORWARD AND STRUCK THE VEHICLE IN FRONT OF IT. THE CONTACT NOTICED THAT THE GEAR WAS IN NEUTRAL AND THE BRAKE AND CLUTCH PEDALS WERE STILL DEPRESSED. SHE WAS CERTAIN THAT SHE DID NOT DEPRESS THE ACCELERATOR PEDAL. THE AIR BAGS DEPLOYED AND BOTH VEHICLES WERE TOWED. THE DEALER WAS UNABLE TO DETERMINE THE CAUSE OF FAILURE. THE CONTACT WAS INJURED AND A POLICE REPORT WAS FILED. THE SPEED WAS UNKNOWN. THE CURRENT AND FAILURE MILEAGES WERE 16,000.

AS SHE TRIED TO PARK, AND WAS INJURED.

(IN)JURIES: LEFT KNEE SPRAIN, RT THUMB FRACTURED

HAS NOT TO DATE DETERMINED CAUSE.

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.