



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 2008 JAN 29 AM 7:30
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OWNER INFORMATION (Type or Print)

Name [REDACTED]
Address [REDACTED]
City SHEPHERDSVILLE State KY 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 authorization, NHTSA WILL NOT provide your name or address to the vehicle manufacturer.
Signature of Owner [REDACTED] Date 1/10/08

VEHICLE INFORMATION

17 digit Vehicle Identification Number Located at bottom of windshield on driver's side 1FDRE14L1YH [REDACTED] Make FORD Model ECONOLINE Model Year 2000

Date Purchased 3-10-04 Dealer's Name and Telephone Number Downtown Ford 584-9731 Engine: No: Cylinders 8 Fuel Type: Diesel

Original Owner Dealer's City Louisville State KY Zip Code 40165

Transmission Type AUTOMATIC Antilock Brakes Cruise Control Powertrain REAR WHEEL DRIVE Vehicle Component Code 180000 VEHICLE SPEED CONTROL Multiple Failure: 0

FAILED COMPONENT(S)/PART(S) INFORMATION

Incident Date(s) 16-AUG-2007 Failure Mileage Failure Speed 0

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 0 Number of Deaths 0 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).

TL*THE CONTACT OWNS A 2000 FORD ECONOLINE. THE CONTACT RECEIVED A SAFETY RECALL NOTICE FOR THE VEHICLE SPEED CONTROL IN AUGUST OF 2007. SINCE THAT TIME, HE HAS BEEN CALLING FORD EVERY SINCE. THE DEALER STATED THAT THE PARTS WOULD NOT BE AVAILABLE UNTIL MARCH OF 2008. THERE HAD BEEN NO FAILURE TO DATE. THE PURCHASE DATE AND RECALL NUMBER WERE UNKNOWN. THE CURRENT MILEAGE WAS 54,000.

Recall # 05S28 - Is the original part had been made in the U.S. it probably wouldn't have been defective or a quality replacement part would have been available in a timely manner.

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.