



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

23-JUN-2008

Reference No.
10232076

OWNER INFORMATION (Type or Print)

Name [REDACTED]
Address [REDACTED]
City FOSTER CITY State CA Zip Code [REDACTED]

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? YES NO
In the absence of an authorization, NHTSA WILL NOT provide your name or address to the vehicle manufacturer.
Signature of Owner _____ Date ____/____/____

VEHICLE INFORMATION

17 digit Vehicle Identification Number Located at bottom of windshield on driver's side
1ZVFT82H46 [REDACTED] Make FORD Model MUSTANG GT Model Year 2006
Date Purchased 1-11-08 Dealer's Name and Telephone Number TOWNE FORD 650-366-5744 Engine: No: Cylinders 8 Fuel Type: Prem.
Original Owner [REDACTED] Dealer's City REDWOOD CITY State CA Zip Code 94065
Transmission Type MANUAL Antilock Brakes Cruise Control Powertrain V8-RWD Vehicle Component Code 141000 AIR BAGS:FRONTAL Multiple Failure:

FAILED COMPONENT(S)/PART(S) INFORMATION

Incident Date(s) 11-JAN-2008 Failure Mileage 115 Failure Speed 35

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 2006 FORD MUSTANG GT. WHILE DRIVING 35 MPH, ON THE DATE THE VEHICLE WAS PURCHASED, THE AIR BAG LIGHT ILLUMINATED. THE CONTACT TOOK THE VEHICLE TO THE DEALER AND THEY STATED THAT THE VEHICLE WAS UNDER RECALL AND REPAIRED IT FOR FREE. HOWEVER, THE VEHICLE WAS NEVER REPAIRED AND, WHENEVER A PASSENGER UNDER THE 150 POUNDS IS SEATED IN THE PASSENGER SEAT, THE AIR BAG INDICATOR LIGHT WILL STILL ILLUMINATE. THE CONTACT HAS TAKEN THE VEHICLE TO THE DEALER TWICE SINCE THE MOST RECENT FAILURE, BUT THEY HAVE BEEN UNABLE TO ASSIST. THE RECALL NUMBER WAS UNKNOWN. THE FAILURE MILEAGE WAS 115 AND CURRENT MILEAGE WAS 5,000.

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 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)

FORD HAS STATED THAT THE AIRBAG SENSOR IS SET SO THAT A "5TH PERCENTILE" PASSENGER RIDING WITHOUT A SEATBELT WITH THE SEAT ALL OF THE WAY FORWARD WILL NOT BE INJURED. IS THIS REAL WORLD?

ATTACH ADDITIONAL SHEETS IF NECESSARY

U.S. Department of Transportation

National Highway Traffic Safety Administration

1200 New Jersey Avenue SE, Washington, D.C. 20077-9382

Official Business Penalty for Private Use \$300



NO POSTAGE NECESSARY IF MAILED IN THE UNITED STATES



BUSINESS REPLY MAIL

FIRST-CLASS MAIL PERMIT NO. 1888 WASHINGTON, DC

POSTAGE WILL BE PAID BY ADDRESSEE

US Department of Transportation National Highway Traffic Safety Administration Office of Defects Investigation, NVS-210 1200 New Jersey Ave SE Washington, DC 20077-9382



Think your vehicle has a safety defect?



If so: Use the enclosed form to file a report.

or visit: www.safercar.gov

or call: Vehicle Safety Hotline 888-327-4236



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