



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-OCT-2008

Reference No.
10246542

OWNER INFORMATION (Type or Print)

Name

Address

City MT. EDEN

State KY

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? YES NO
In the absence of an authorized signature, NHTSA will NOT provide your name or address to the vehicle manufacturer.
Signature of Owner _____ Date 10/23/08

VEHICLE INFORMATION

17 digit Vehicle Identification Number Located at bottom of windshield on driver's side
1ZVFT82H56

Make
FORD

Model
MUSTANG

Model Year
2006

Date Purchased
5-16-06

Dealer's Name and Telephone Number
CROSSROADS LINDA MERE

Engine:
No: Cylinders 8

Fuel Type:
Reg. unle.

Original Owner

Dealer's City
FRANKFORT

State
KY

Zip Code

Transmission Type
5 speed

Antilock Brakes
 Cruise Control

Powertrain
4:6 V8

Multiple Failure:
YES

Incident Date(s)
06-JUN-2006

FAILED COMPONENT(S)/PART(S) INFORMATION

Vehicle Component Code: 090000 FUEL SYSTEM, OTHER

Failure Mileage
1000

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 2006 FORD MUSTANG. WHENEVER THE FUEL TANK WAS BEING FILLED, GASOLINE WOULD SPILL OUT. THE TANK WAS NOT FILLED TO CAPACITY. THE FUEL NOZZLE STOPPED WHEN THE TANK WAS HALF FULL, BUT GASOLINE STILL SPRAYED OUT OF THE TANK. THERE WERE NO PRIOR WARNINGS TO THIS FAILURE. THE VEHICLE WAS TAKEN TO AN AUTHORIZED DEALER AND THEY STATED THAT THIS WAS A MANUFACTURER DESIGN DEFECT. THE MANUFACTURER IS AWARE OF THE FAILURE AND ENGINEERS ARE CONDUCTING AN EVALUATION. THERE IS CURRENTLY NO REMEDY FOR THE MALFUNCTION. THE FAILURE MILEAGE WAS 1,000 AND CURRENT MILEAGE WAS 25,000.

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 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)

IF YOU GO ON GOOGLE AND TYPE IN MUSTANG FUELING PROBLEMS YOU WILL SEE OTHER PEOPLE WHO HAVE THIS PROBLEM

IT JUST TAKES APPROX. 10 MIN TO FILL IT UP WITH GAS. THE PUMP KEEPS KICKING OFF BECAUSE THE GAS WILL NOT FLOW INTO THE TANK. THIS HAS BEEN A PROBLEM SINCE THE 2005 MUSTANG BUT NOT ON ALL OF THEM. SO FORD DOES NOT THINK ASIDE ITS NOT ALL OF THEM YOU HAVE TO LIVE WITH IT. I WOULD HAVE A PROBLEM SELLING THE CAR WITH THIS PROBLEM.

ATTACH ADDITIONAL SHEETS IF NECESSARY

Fl
ported

Mount Eden, KY

Supporter

Mount Eden, KY

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

LOUISVILLE KY 402

30 OCT 2008 PM 4 T

NO POSTAGE NECESSARY IF MAILED IN THE UNITED STATES

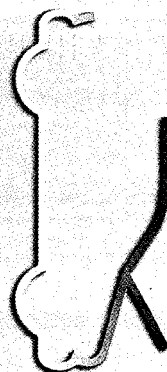
BUSINESS REPLY MAIL
FIRST-CLASS MAIL PERMIT NO. 1888 WASHINGTON, DC

POSTAGE WILL BE PAID BY ADDRESSEE

U.S. Department of Transportation
National Highway Traffic Safety Administration
Office of Defects Investigation, NVS-210
1200 New Jersey Avenue SE.
Washington, D.C. 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



Vehicle Owners' Questionnaire (VOQ)
U.S. Department of Transportation
National Highway Traffic Safety Administration