U.S. Department of Transportation
National Highway Traffic Safety Administration

2009 MAR -3 PM 4:16

# 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 |
|---|---|
| 22-JAN-2009 | Reference No. 10255999 |

**OWNER INFORMATION (Type or Print)**

| Name | Daytime Telephone Number | E-mail Address |
|---|---|---|
| [redacted] | [redacted] | |
| **Address** [redacted] | Evening Telephone Number | |
| **City** BIG BAY **State** MI **Zip Code** [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 [redacted] your name or address to the vehicle manufacturer.*
Signature of Owner [redacted] Date 1/12/09

**VEHICLE INFORMATION**

| 17 digit Vehicle Identification Number Located at bottom of windshield on driver's side | Make | Model | Model Year |
|---|---|---|---|
| 1FDPE24L23[redacted] | FORD | E250 | 2003 |

| Date Purchased | Dealer's Name and Telephone Number | | | Engine: | Fuel Type: |
|---|---|---|---|---|---|
| | | | | No: Cylinders 8 | GASOLINE |
| Original Owner ☐ | Dealer's City | State | Zip Code | | |

| Transmission Type | | | Powertrain | Multiple Failure: | Incident Date(s) |
|---|---|---|---|---|---|
| AUTO | ☒ Antilock Brakes | ☒ Cruise Control | | | 17-NOV-2008 |

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

| Vehicle Component Code: 140000 AIR BAGS | Failure Mileage | Failure Speed |
|---|---|---|
| | 27000 | 35 |

**ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A TIRE FAILURE**

| Tire Make | Tire Model (Name or Number) | Tire Size (Example P215/65R15) |
|---|---|---|
| MICHELIN | | |

| DOT No. (Example: DOTMAL9ABC036) | | Failure Location: |
|---|---|---|
| | ☒ Original Equipment ☐ Prior Repair | |

| 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 | Fire | Number of Persons Injured | Number of Deaths | Reported to Police |
|---|---|---|---|---|
| ☒ Yes ☐ No | ☐ Yes ☒ No | 1 | 0 | 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 2003 FORD E250. WHILE DRIVING 35 MPH IN INCLEMENT WEATHER CONDITIONS, THE CONTACT CRASHED INTO A LIGHTPOLE AND SEVERAL TREES. THE VEHICLE WAS COMPLETELY DESTROYED AND NONE OF THE AIR BAGS DEPLOYED. THERE WERE [redacted] INJURIES AND A POLICE REPORT WAS FILED. THE VEHICLE HAS NOT BEEN INSPECTED TO DETERMINE THE CAUSE OF THE FAILURE. THE MANUFACTURER AND DEALER HAVE NOT BEEN NOTIFIED. THE FAILURE AND CURRENT MILEAGES WERE 27,000.

Include, if available: Police/Fire Department Report, Photos, and Repair Invoice. ATTACH ADDITIONAL SHEETS IF NECESSARY

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

DRIVING SOUTH ON COUNTY ROAD 550 (MARQUETTE COUNTY) DURING A SNOW STORM. RIGHT SIDE OF VEHICLE SLIPPED ONTO RIGHT SHOULDER OF HIGHWAY. AT SAME MOMENT A SNOW WHITE OUT OCCURRED. WHILE CORRECTING TO GET BACK ON HIGHWAY, THE VEHICLE SPUN AND WENT OFF ROAD AT LEFT SHOULDER, DOWN THE EMBANKMENT, OVER A POWER POLE THAT WAS LYING ON THE ROAD EDGE AND HEAD FIRST INTO THE TREES. FORTUNATELY I WAS WEARING A SEAT BELT & SHOULDER HARNESS AS NONE OF THE AIR BAGS DEPLOYED. I SPENT 5 DAYS IN THE HOSPITAL AND AM STILL RECOVERING. I HAVE NO TRANSPORTATION

ATTACH ADDITIONAL SHEETS IF NECESSARY

KINGSFORD MI 498

14 FEB 2009 PM 1 L

NO POSTAGE NECESSARY IF MAILED IN THE UNITED STATES

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

**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 Avenue SE.
Washington, D.C. 20077-9382