



DOT Auto Safety Hotline

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

**Vehicle Owner's Questionnaire**  
To Report Vehicle Safety Defects  
2009 JUN 18 PM 1:57-888-DASH-2-DOT  
(1-888-327-4236)  
INTERNET:www.nhtsa.dot.gov/hotline

FOR AGENCY USE ONLY 100148

Date Received	Repository <input type="checkbox"/>
18-MAY-2009	Reference No. 10269028

**OWNER INFORMATION (Type or Print)**

Name: [REDACTED]  
Address: [REDACTED]  
City: LOUISVILLE 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: \_\_\_\_\_ Date: / /

**VEHICLE INFORMATION**

17 digit Vehicle Identification Number Located at bottom of windshield on driver's side: IFMYU03135K [REDACTED]

Make FORD	Model ESCAPE	Model Year 2005
Date Purchased 8-16-05	Dealer's Name and Telephone Number Star Ford At DxmooY 502-426-2500	Engine: No: Cylinders 6
Original Owner <input checked="" type="checkbox"/>	Dealer's City Louisville	Fuel Type: Reg
State KY	Zip Code 40222	
Transmission Type Automatic	<input checked="" type="checkbox"/> Antilock Brakes <input checked="" type="checkbox"/> Cruise Control	Powertrain Multiple Failure:
		Incident Date(s) 15-MAY-2008

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

Vehicle Component Code: 103000 POWER TRAIN: AUTOMATIC TRANSMISSION

Failure Mileage 30000	Failure Speed 0
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**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)	<input type="checkbox"/> Original Equipment <input type="checkbox"/> 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 <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Fire <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Number of Persons Injured 0	Number of Deaths 0	Reported to Police N
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**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 2005 OR 2006 FORD ESCAPE. THE CONTACT STATED THAT THE VEHICLE ROLLS BACKWARD WHEN PARKED ON AN INCLINE AND WITHOUT THE BRAKE PEDAL BEING DEPRESSED. THE FAILURE OCCURRED ONE YEAR AGO AT 30,000 MILES, BUT HAS RECENTLY RECURRENT AT 39,000 MILES. THE VEHICLE HAS ONLY UNDERGONE REGULARLY SCHEDULED MAINTENANCE. THE VIN WAS UNKNOWN. THE CURRENT MILEAGE WAS 39,000 AND FAILURE MILEAGE WAS 30,000.

Vehicle in Drive - Now mileage is 38,949

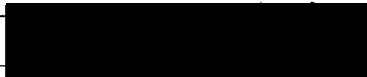
I was not parked - only stopped - vehicle was in drive.

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)**

I was stopped on small incline - vehicle was in Drive when I took my foot off the brake the vehicle rolled backward, I had to put the brakes on to stop it from rolling backward - this was happened while the vehicle was in drive.



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

Louisville Ky.

Official Business  
Penalty for Private Use \$300



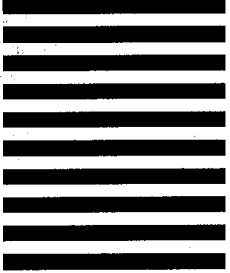
NO POSTAGE  
NECESSARY  
IF MAILED  
IN THE  
UNITED STATES

**BUSINESS REPLY MAIL**

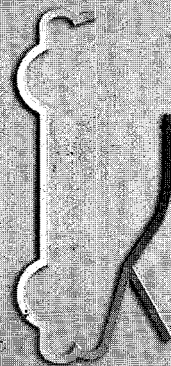
FIRST-CLASS MAIL PERMIT NO. 1888 WASHINGTON, DC

POSTAGE WILL BE PAID BY ADDRESSEE

**US Department of Transportation  
National Highway Traffic Safety Administration  
Office of Defects Investigation, NVS-210  
1200 New Jersey 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

