INFORMATION Redacted PURSUANT TO THE FREEDOM OF INFORMATION ACT (FOIA), 5 U.S.C. 552(B)(6)

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 ☐
MAY 17 2010 (23-FEB-2010)	Reference No. 10313366

OWNER INFORMATION (Type or Print)

Name		Daytime Telephone Number	E-mail Address
Address		Evening Telephone Number	
City: DUMFRIES	State: VA	Zip Code:	

The information you provide will be used to identify potential safety-related defects. We may share your information with the applicable vehicle manufacturer during an investigation or recall in accordance with the routine uses described in the agency's Privacy Act notice. See 49 FR 53971 (Sep. 3, 2004).

VEHICLE INFORMATION

17 digit Vehicle Identification Number Located at bottom of windshield on driver's side	Make	Model	Model Year
1FAFP40442F	FORD	MUSTANG	2002

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

Transmission Type	☐ Antilock Brakes ☐ Cruise Control	Powertrain	Multiple Failure:	Incident Date(s)
				19-JUN-2009

FAILED COMPONENT(S)/PART(S) INFORMATION

Vehicle Component Code: 150000 SEAT BELTS	Failure Mileage	Failure Speed
	62000	

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: DOTMAL9ABC036)	☐ 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	Fire	Number of Persons Injured	Number of Deaths	Reported to Police
☐ Yes ☒ No	☐ Yes ☒ No			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 2002 FORD MUSTANG. HE STATED THAT SINCE THE DATE OF PURCHASED HE NOTICED THAT THE SEAT BELT RETRACTORS WERE DEFECTIVE. HE HAS NOT TAKEN THE VEHICLE TO THE DEALER. HE WILL NOT HAVE THE FAILURE REPAIRED, HE WILL SELL OR TRADE IN THE VEHICLE. THE FAILURE MILEAGE WAS 62,000 AND THE CURRENT MILEAGE WAS 7400.

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)

I [redacted] to contact Ford Moto- Co. on my behalf. I further authorize NHTSA to release my name to assist in resolving my complaint. [redacted]

Note: This seatbelt is a problem on all the 2002 Mustangs I personally inspected after purchasing mine.

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

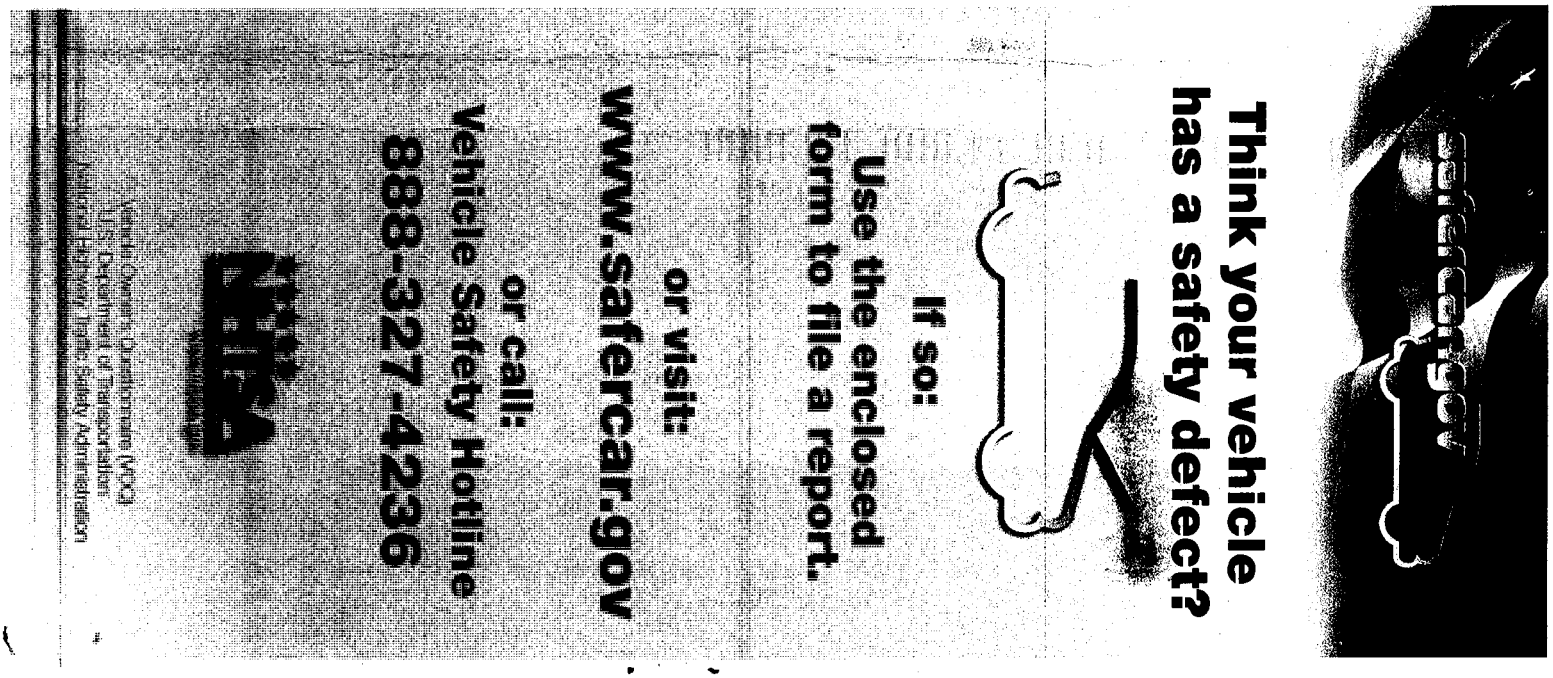
NO VA 220
07 MAY 2010 PM 5 T

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

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



Customer Follow-Up Survey

PO Box 930
Ann Arbor, Michigan 48106-0930

[redacted]
Dumfries, VA [redacted]

For your convenience, if you would prefer to complete this survey online, please go to https://www.FordViewpoint.com/CRC.

Your personal **User ID is 6201208037** and your **PIN is 64cfca83**. Please do not answer by mail if you have answered online.

Dear [redacted]

Ford Motor Company's Relationship Center appreciated the opportunity to answer your questions on February 23, 2010.

As a valued customer, your opinion is very important to us. Please take a moment to complete this brief survey regarding your experience.

Ford Motor Company will use the information you provide to improve our products and services. **This information is not shared or disclosed to outside parties for their own sales or marketing efforts.**

Thank you in advance for your time in completing this survey.

Sincerely,

R J O Malley

Rosemary O'Malley
Manager, Customer Relationship Center
Ford Motor Company

Your Experience

This survey should be completed by the person who contacted Ford Motor Company's Customer Relationship Center on February 23, 2010.

1 How would you rate your satisfaction with the way your call on February 23, 2010 was handled by your Customer Care Representative?

Completely Satisfied	Very Satisfied	Fairly Well Satisfied	Somewhat Dissatisfied	Completely Dissatisfied
☐	☐	☐	☐	☒

Skip to Question #2

If *Fairly Well Satisfied, Somewhat Dissatisfied* or *Completely Dissatisfied*, please explain why. Ford has absolutely no intention of correcting what is obviously a recall item.

Your Experience *(continued)*

2 How would you rate your Customer Care Representative in terms of . . .

	Excellent	Very Good	Good	Fair	Poor
a. Treating you with courtesy and respect	☐	☐	☒	☐	☐
b. Professionalism	☐	☐	☒	☐	☐
c. Treating you as a valued customer	☐	☐	☐	☒	☐
d. Understanding your question or concern	☐	☐	☐	☒	☐
e. Knowledge to answer your question or resolve your concern	☐	☐	☐	☒	☐
f. Working to resolve your question or concern as quickly as possible	☐	☐	☐	☐	☒
g. Finding a satisfactory resolution to your question or concern	☐	☐	☐	☐	☒

	Completely Satisfied	Very Satisfied	Fairly Well Satisfied	Somewhat Dissatisfied	Completely Dissatisfied
3 How would you rate your satisfaction with the length of time you had to wait before your call was answered?	☐	☐	☐	☒	☐

4 Was the Customer Care Representative able to answer your question or resolve your concern during the first call?

☐ Yes ☒ No

5 During your call on February 23, 2010, did you speak to more than one representative?

☐ Yes ☒ No

6 Did your question or concern require follow-up from the Customer Relationship Center?

☐ Yes ☒ No *(If NO, skip to Question #9)*

7 Within how many business days after February 23, 2010 were you contacted by a Ford Motor Company representative regarding your question or concern?

☐ Same day ☐ Within 1-2 days ☐ Within 3-7 days ☐ More than 7 days ☐ Have not been contacted

	Completely Satisfied	Very Satisfied	Fairly Well Satisfied	Somewhat Dissatisfied	Completely Dissatisfied
8 How satisfied are you with the length of time it took for the Customer Relationship Center to follow up on your question or concern?	☐	☐	☐	☐	☐

In Summary

9 Has your question or concern been resolved to your satisfaction?

☐ Yes ☒ No

	Completely Satisfied	Very Satisfied	Fairly Well Satisfied	Somewhat Dissatisfied	Completely Dissatisfied
10 Overall, how would you rate your satisfaction with the Customer Relationship Center?	☐	☐	☐	☐	☒

Recommendations

	Definitely Would	Probably Would	Maybe Would, Maybe Not	Probably Would Not	Definitely Would Not
11 Based on your experience, how likely would you be to purchase another Ford, Lincoln, or Mercury vehicle?	☐	☐	☐	☐	☒
12 Would you recommend a Ford, Lincoln, or Mercury vehicle?	☐	☐	☐	☐	☒

Tell Us About Yourself

13 Your gender: ☐ Female ☒ Male

14 Your age: ☐ Under 25 ☐ 25-34 ☐ 35-44 ☒ 45-54 ☐ 55-64 ☐ 65-74 ☐ 75 or over

Please return in the postage-paid envelope provided.

Thank you!