 <p>U.S. Department of Transportation National Highway Traffic Safety Administration</p>		<p>INFORMATION ACT (FOIA), 5 U.S.C. 552(B)(6) DOT Auto Safety Hotline</p> <p>Vehicle Owner's Questionnaire To Report Vehicle Safety Defects 1-888-DASH-2-DOT (1-888-327-4236) INTERNET: www.nhtsa.dot.gov/hotline</p>		<p>FOR AGENCY USE ONLY 100148</p> <p>Date Received AUG 29 2011 01-JUL-2011</p>		<p>Repository <input type="checkbox"/></p> <p>Reference No. 10410217</p>	
<p>OWNER INFORMATION (Type or Print)</p>							
Name		Address		City		State	
[REDACTED]		[REDACTED]		ESSEX JUNCTION		VT	
Zip Code		Daytime Telephone Number		Evening Telephone Number		E-mail Address	
[REDACTED]		[REDACTED]		[REDACTED]		[REDACTED]	
<p><i>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).</i></p>							
<p>VEHICLE INFORMATION</p>							
17 digit Vehicle Identification Number Located at bottom of windshield on driver's side 1FMYU96H15K [REDACTED]				Make FORD		Model ESCAPE HYBRID	Model Year 2005
Date Purchased April 2010		Dealer's Name and Telephone Number Heritage Ford 802-865-8150			Engine: No: Cylinders 4		Fuel Type: Hybrid
Original Owner <input type="checkbox"/>		Dealer's City South Burlington		State VT	Zip Code 05403		
Transmission Type		<input checked="" type="checkbox"/> Antilock Brakes <input type="checkbox"/> Cruise Control		Powertrain		Multiple Failure:	
						Incident Date(s) 12-APR-2011	
<p>FAILED COMPONENT(S)/PART(S) INFORMATION</p>							
Vehicle Component Code: 030000 SERVICE BRAKES, HYDRAULIC ABS Computer Failed						Failure Mileage 67137	Failure Speed 35mph
<p>ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A TIRE FAILURE</p>							
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:			
<p>ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A CHILD SEAT FAILURE</p>							
Make:		Date Manufactured:		Model No./Name:			
Seat Type:		Installation System:					
Child Seat Component Code:				Failed Part:			
<p>APPLICABLE INCIDENT INFORMATION (Please describe in detail the incident(s), Failure(s), Crash(es), and injury(ies).)</p>							
Crash <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Fire <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Number of Persons Injured		Number of Deaths	Reported to Police N
<p>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).</p>							
<p>TL* THE CONTACT OWNS A 2005 FORD ESCAPE HYBRID. THE CONTACT STATED THAT THE BRAKE WARNING LIGHT ILLUMINATED ON THE DASHBOARD. THE BRAKES WERE THEN APPLIED, AND THE BRAKE PEDAL DEPRESSED TO THE FLOOR AS THE CONTACT COULD HEAR A GRINDING NOISE. THE VEHICLE WAS TAKEN TO AN AUTHORIZED DEALER WHERE THE CONTACT WAS INFORMED THAT THE ANTI BRAKING SYSTEM COMPUTER FAILED AND NEEDED TO BE REPLACED. THE MANUFACTURER WAS MADE AWARE OF THE FAILURE, BUT OFFERED NO ASSISTANCE. THE VEHICLE WAS REPAIRED. THE FAILURE AND CURRENT MILEAGES WERE 67,137.</p>							
<p>Include, if available: Police/Fire Department Report, Photos, and Repair Invoice.</p>				<p>ATTACH ADDITIONAL SHEETS IF NECESSARY</p>			
<p>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.</p>							

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

While driving 35 mph The ABS light came on when pressing the brake it went all the way to the floor and I had to put the car in neutral and use the emergency brake to come to a stop. No accident occurred as no other vehicles were around. I had the vehicle repaired for over \$3500.00 see enclosed receipt. The service manager said to report this to you due to this being a significant safety issue.

ATTACH ADDITIONAL SHEETS IF NECESSARY

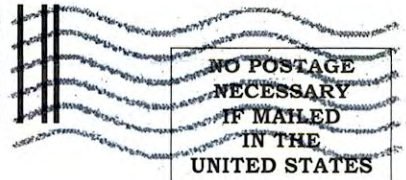
US Department of Transportation

National Highway Traffic Safety Administration

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

Official Business Penalty for Private Use \$300

BURLINGTON VT 054
17 AUG 2011 PM 2:17



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**



safercar.gov

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

720027

480974



INVOICE

1600 Shelburne Road, South Burlington, VT 05403
P.O. Box 1100, Burlington, VT 05402-1100
Telephone (802) 865-8150
Toll Free (800) 833-6017

VT HOME:
BUS:

CONT:
CELL:

PAGE 1

SERVICE ADVISOR: 309 BRIAN LAROCHE

Table with columns: COLOR, YEAR, MAKE/MODEL, VIN, LICENSE, MILEAGE IN/ OUT, TAG, DEL DATE, PROD. DATE, WARR. EXP., PROMISED, PO NO., RATE, PAYMENT, INV. DATE. Includes vehicle details for a silver 2005 Ford Escape.

Table with columns: LINE, OPCODE, TECH, TYPE, HOURS, LIST, NET, TOTAL. Contains work order details for brake inspection and repair.

Table with columns: B, MOUNT AND BALANCE 4 TIRES, MB4 MOUNT AND BALANCE 4 TIRES, 67137 1.60 MOUNT AND BALANCE FOUR TIRES, C CHANGE ENGINE OIL & FILTER, 1P CHANGE ENGINE OIL & FILTER, 67137 0.30 CHANGED OIL AND FILTER.

YOUR COMPLETE SATISFACTION IS OUR GOAL
If for ANY reason you are not COMPLETELY SATISFIED, please contact:
Gregg Rufolo, Service Manager 865-8157

Safer Cars.gov
ODI: 10410217
Conf# 365499

"Thank You For Your Patronage"



ON BEHALF OF SERVICING DEALER, I HEREBY CERTIFY THAT THE INFORMATION CONTAINED HEREON IS ACCURATE UNLESS OTHERWISE SHOWN. SERVICES DESCRIBED WERE PERFORMED AT NO CHARGE TO OWNER...

STATEMENT OF DISCLAIMER
The factory warranty constitutes all of the warranties with respect to the sale of this item/items.

DISPOSAL OF HAZARDOUS WASTE
The State of Vermont requires that all hazardous waste (Oil, Solvents, Anti-Freeze, etc.) must be disposed of by a licensed contractor in an environmentally safe manner.

ALL PARTS INSTALLED ARE NEW UNLESS SPECIFIED OTHERWISE.

Table with columns: DESCRIPTION, TOTALS. Summary of charges including Labor Amount (506.65), Parts Amount (2871.18), and Total Charges (3377.83).