

 <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>OWNER INFORMATION (Type or Print)</p>		<p>Date Received SEP 16 2011 02-AUG-2011</p>		<p>Repository <input type="checkbox"/></p> <p>Reference No. 10416705</p>	
<p>Name [REDACTED]</p>		<p>Daytime Telephone Number [REDACTED]</p>		<p>E-mail Address</p>	
<p>Address [REDACTED]</p>		<p>Evening Telephone Number</p>			
<p>City CAMERON PARK</p>	<p>State CA</p>	<p>Zip Code [REDACTED]</p>			
<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>					
<p>17 digit Vehicle Identification Number Located at bottom of windshield on driver's side 1FAHP60A22Y [REDACTED]</p>		<p>Make FORD</p>	<p>Model THUNDERBIRD</p>	<p>Model Year 2002</p>	
<p>Date Purchased MAY 2005</p>	<p>Dealer's Name and Telephone Number</p>		<p>Engine: No: Cylinders</p>	<p>Fuel Type:</p>	
<p>Original Owner <input type="checkbox"/></p>	<p>Dealer's City</p>	<p>State</p>	<p>Zip Code</p>		
<p>Transmission Type</p>	<p><input type="checkbox"/> Antilock Brakes <input type="checkbox"/> Cruise Control</p>	<p>Powertrain</p>	<p>Multiple Failure:</p>	<p>Incident Date(s) 02-JUN-2011</p>	
<p>FAILED COMPONENT(S)/PART(S) INFORMATION</p>					
<p>Vehicle Component Code: 140000 AIR BAGS</p>			<p>Failure Mileage 90000</p>	<p>Failure Speed 0</p>	
<p>ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A TIRE FAILURE</p>					
<p>Tire Make</p>	<p>Tire Model (Name or Number)</p>		<p>Tire Size (Example P215/65R15)</p>		
<p>DOT No. (Example: DOTMAL9ABC036)</p>	<p><input type="checkbox"/> Original Equipment <input type="checkbox"/> Prior Repair</p>	<p>Failure Location:</p>			
<p>Tire Component Code</p>			<p>Tire Failure Type:</p>		
<p>ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A CHILD SEAT FAILURE</p>					
<p>Make:</p>	<p>Date Manufactured:</p>	<p>Model No./Name:</p>			
<p>Seat Type:</p>		<p>Installation System:</p>			
<p>Child Seat Component Code:</p>		<p>Failed Part:</p>			
<p>APPLICABLE INCIDENT INFORMATION (Please describe in detail the incident(s), Failure(s), Crash(es), and injury(ies).)</p>					
<p>Crash <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p>	<p>Fire <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p>	<p>Number of Persons Injured</p>	<p>Number of Deaths</p>	<p>Reported to Police N</p>	
<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 2002 FORD THUNDERBIRD. THE CONTACT STATED THAT THE DRIVERS SIDE AIR BAG WARNING LIGHT HAD BEEN ILLUMINATED ON THE INSTRUMENTAL PANEL FOR APPROXIMATELY TWO MONTHS. THE VEHICLE WAS INSPECTED BY A DEALER AND THEY STATED THAT THE DRIVERS SIDE AIR BAG HAD A HIGH RESISTANCE FAILURE. THE VEHICLE HAD NOT BEEN REPAIRED. THE MANUFACTURER WAS NOTIFIED AND THEY OFFERED NO ASSISTANCE. THE FAILURE MILEAGE WAS APPROXIMATELY 90,000.</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>					



FOLSOM LAKE FORD
Northern California's New Ford Source

INTERNET: <http://www.folsomlakeford.com>
E-MAIL: info@folsomlakeford



QUALITY PARTS FOR QUALITY CARS

EPA# CA0000926972
BAR # AL143518

PERFORMANCE EQUIPMENT

12755 FOLSOM BLVD., FOLSOM, CA 95630 916-353-2000



CELL: [REDACTED]

CUSTOMER NO 150594	ADVISOR TODD	TAG NO. 5557 3058	INVOICE DATE 08/11/11	INVOICE NO. FOQS620184
[REDACTED]	LICENSE NO.	MILEAGE 92,578	COLOR RED/	STOCK NO.
CAMERON PARK, CA	YEAR / MAKE / MODEL 02/FORD/THUNDERBIRD/2 DOOR CONVERTIB	DELIVERY DATE	DELIVERY MILES	
[REDACTED]	VEHICLE I.D. NO. 1 F A H P 6 0 A 2 2 Y	SELLING DEALER NO.	PRODUCTION DATE	
[REDACTED]	F.T.E. NO.	P.O. NO.	R.O. DATE 08/01/11	REPRINT# 1
RESIDENCE PHONE	BUSINESS PHONE	COMMENTS	MO: 92578	

JOB# 1 CHARGES-----

LABOR-----
J# 1 10FOZ CHARGING SYSTEM DIAG TECH(S):825 427.00
CHECK AND ADVISE SRS LIGHT ON
SELF TEST CODE FOR PASS. SIDE IMPACT BAG PERFORM PINPOINT
TEST FOUND SIDE BAG HIGH RESISTANCE INSPECTED WHEN MOVED
WIRES AT SIDE AIR BAG RESISTANCED DROPPED NEED TO REPLACE
SIDE IMPACT BAG ASSY
PART ON ORDER PREPAID, LABOR RETURN VISIT WILL BE 305.00
INSTALLED PASS SIDE IMPACT BAG ASSY RECK NO CODES

PARTS	QTY	FP-NUMBER	DESCRIPTION	LIST PRICE	UNIT PRICE	PRICE-
	1	3W6Z-76611D10-AA	MODULE 827679	253.10	253.10	253.10
						TOTAL - PARTS 253.10

JOB# 1 TOTALS-----
LABOR 427.00
PARTS 253.10

JOB# 1 JOURNAL PREFIX FOQS JOB# 1 TOTAL 680.10

JOB# 2 CHARGES-----

LABOR-----
J# 2 01FOZTIRE-PSI TIRE PSI INSPECTION TECH(S):825 INTERNAL
INSPECT TIRE PRESSURE AND DOCUMENT
LEFT FRONT-----LEFT REAR-----RIGHT FRONT-----RIGHT REAR-----
TIRE INFLATION REGULATION
SET TO SPECS

JOB# 2 TOTALS-----
LABOR 0.00
PARTS 0.00
JOB# 2 JOURNAL PREFIX FOQS JOB# 2 TOTAL 0.00

LABOR-----
J# 3 80FOZ99P FORD 12PT INSPECTION TECH(S):825 INTERNAL
INSP BELTS, HOSES, BATT & CABLES, P/S, MAST CYL, WASH FLUID
& TOP OFF, CHK AIR FILT, TIRE PSI, DRIVE SFT, U-JOINTS, EXH
SYSTEM FOR LEAKS, SHOCKS/STRUTS FOR BROKEN PARTS, VISUALLY
INSP BRAKES TO DEGREE POSSIBLE, CHK FOR OTHER FLUID LEAKS

JOB# 3 TOTALS-----
LABOR 0.00
PARTS 0.00
JOB# 3 JOURNAL PREFIX FOQS JOB# 3 TOTAL 0.00

ESTIMATE-----
CUSTOMER HEREBY ACKNOWLEDGES RECEIVING
ORIGINAL ESTIMATE OF \$122.00 (+TAX)
APPROVED REVISED ESTIMATE (# 1) OF \$376.00 (+TAX) ON 08/02/11 AT 10:00am
BY GRACIE COMMENTS
APPROVED REVISED ESTIMATE (# 2) OF \$700.00 (+TAX) ON 08/08/11 AT 11:00am
BY GRACIE COMMENTS

The Reynolds and Reynolds Company, EPA#151447-G, 10/03



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[REDACTED]	F.T.E. NO.	P.O. NO.	R.O. DATE 08/01/11	REPRINT# 1
RESIDENCE PHONE [REDACTED]	BUSINESS PHONE [REDACTED]	COMMENTS		MO: 92578

TOTALS-----

NEW SERVICE DEPARTMENT HOURS 7:00AM TO 6:00PM MONDAY
7:00AM TO 7:00PM TUE-FRIDAY!
8:00AM TO 5:00PM SATURDAYS
BODYSHOP HOURS : 8:00AM TO 5:00PM M-F

TOTAL LABOR.... 427.00
TOTAL PARTS.... 253.10
TOTAL SUBLET... 0.00
TOTAL G.O.G.... 0.00
TOTAL MISC CHG. 0.00
TOTAL MISC DISC 0.00
TOTAL TAX..... 19.62

TOTAL INVOICE \$ 699.72

YOU MAY RECEIVE A SATISFACTION SURVEY BY MAIL OR PHONE. IF YOU'RE NOT COMPLETELY SATISFIED TO ALL THE QUESTIONS, PLEASE CONTACT OUR SERVICE MANAGER. YOUR SATISFACTION IS OUR #1 GOAL, THANK YOU FOR CHOOSING FOLSOM LAKE FORD

www.folsomlakeford.com

I ACKNOWLEDGE NOTICE AND ORAL APPROVAL OF AN INCREASE IN THE ORIGINAL ESTIMATED PRICE.....

CUSTOMER SIGNATURE

The Reynolds and Reynolds Company FRANTISH4E 5051647 Q (10/09)



I acknowledge notice and oral approval of an increase in the original estimated price.

SIGNATURE