

 <p>U.S. Department of Transportation National Highway Traffic Safety Administration</p>	<p>DOT Auto Safety Hotline</p> <p>Vehicle Owner's Questionnaire To Report Vehicle Safety Defects 1-888-DASH-2-DOT (1-888-327-4235) INTERNET: www.nhtsa.dot.gov/hotline</p>		<p>FOR AGENCY USE ONLY 100148</p>	
	<p>Date Received AUG 23 2012 18-JUL-2012</p>		<p>Repository <input type="checkbox"/></p> <p>Reference No. 10466441</p>	
OWNER INFORMATION (Type or Print)				
Name		Daytime Telephone Number		E-mail Address
Address		Evening Telephone Number		
City	State	Zip Code		
OSCEOLA	OSCEOLA	IN		
<p>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).</p>				
VEHICLE INFORMATION				
17 digit Vehicle Identification Number Located at bottom of windshield on driver's side		Make	Model	Model Year
1FCMU0EG5CK		FORD	ESCAPE	2012
Date Purchased	Dealer's Name and Telephone Number		Engine:	Fuel Type:
06/12/2012	HAROLD ZEIGLER 574 294-1563		No: Cylinders	FLEX FUEL
Original Owner <input checked="" type="checkbox"/>	Dealer's City	State	Zip Code	
	ELKHART, IN	IN		
Transmission Type	<input type="checkbox"/> Antilock Brakes	Powertrain	Multiple Failure:	Incident Date(s)
AUTOMATIC	<input checked="" type="checkbox"/> Cruise Control		2	(1) 01-JUL-2012 (2) DON'T REMEMBER
FAILED COMPONENT(S)/PART(S) INFORMATION				
Vehicle Component Code: BRAKES (PWS)			Failure Mileage	Failure Speed
			60	20
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	Failure Location:		
	<input type="checkbox"/> 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 <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
		0	0	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).				
<p>TL* THE CONTACT OWNS A 2012 FORD ESCAPE. THE CONTACT STATED THAT WHILE DRIVING APPROXIMATELY 20 MPH, THE BRAKE PEDAL WAS ENGAGED AND THE PEDAL ABRUPTLY EXTENDED PARTIALLY TO THE FLOOR FOR A BRIEF MOMENT. THE CONTACT WAS ABLE TO CONTINUE DRIVING AS NORMAL. THE VEHICLE HAD NOT BEEN DIAGNOSED OR REPAIRED. THE MANUFACTURER WAS NOT NOTIFIED OF THE PROBLEM. THE APPROXIMATE FAILURE MILEAGE WAS 60.</p>				
<p>Include, if available: Police/Fire Department Report, Photos, and Repair Invoice. 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>				