



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

INFORMATION ACT (FOIA), 5 U.S.C. 552(B)(6)

**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  
**FEB 28 2013**  
18-DEC-2012

Repository

Reference No.  
10489190

**OWNER INFORMATION (Type or Print)**

Name [REDACTED]

Address [REDACTED]

City HERRON State MI Zip Code [REDACTED]

Daytime Telephone Number [REDACTED] E-mail Address [REDACTED]

Evening Telephone Number [REDACTED]

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  
1FMHK8D87CG [REDACTED]

Make FORD Model ESCAPE Model Year 2012

Date Purchased [REDACTED] Dealer's Name and Telephone Number [REDACTED] Engine: No: Cylinders [REDACTED] Fuel Type: [REDACTED]

Original Owner  Dealer's City [REDACTED] State [REDACTED] Zip Code [REDACTED]

Transmission Type  Antilock Brakes  Cruise Control Powertrain [REDACTED] Multiple Failure: [REDACTED] Incident Date(s) 18-SEP-2012

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

Vehicle Component Codes: BRAKES (PWS), 020000 SUSPENSION, 010000 STEERING

Failure Mileage [REDACTED] Failure Speed 40

**ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A TIRE FAILURE**

Tire Make [REDACTED] Tire Model (Name or Number) [REDACTED] Tire Size (Example P215/65R15) [REDACTED]

DOT No. (Example: DOTM19ABC036) [REDACTED]  Original Equipment  Prior Repair Failure Location: [REDACTED]

Tire Component Code [REDACTED] Tire Failure Type: [REDACTED]

**ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A CHILD SEAT FAILURE**

Make: [REDACTED] Date Manufactured: [REDACTED] Model No./Name: [REDACTED]

Seat Type: [REDACTED] Installation System: [REDACTED]

Child Seat Component Code: [REDACTED] Failed Part: [REDACTED]

**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 2012 FORD EXPLORER. THE CONTACT STATED THAT WHILE TRAVELING 40 MPH, THE BRAKES, TRACTION CONTROL AND POWER STEERING ASSIST FAILED. THE VEHICLE WAS MOVED TO THE SHOULDER TO BE RESTARTED AND IT BEGAN TO FUNCTION NORMALLY. THE VEHICLE WAS DRIVEN TO THE DEALER WHERE THE FAILURE COULD NOT BE REPLICATED. THE VEHICLE WAS NOT REPAIRED. THE CONTACT STATED THAT THE FAILURE RECURRED INTERMITTENTLY. THE MANUFACTURER WAS NOT CONTACTED ABOUT THE FAILURE. THE FAILURE MILEAGE WAS UNAVAILABLE.

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.