

 <p><b>DOT Auto Safety Hotline</b>  <b>Vehicle Owner's Questionnaire</b>          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>U.S. Department of Transportation  <b>National Highway Traffic Safety Administration</b></p>				<p>Date Received  <b>MAR 14 2013</b>          01-FEB-2013</p>	
<p><b>OWNER INFORMATION (Type or Print)</b></p>				<p>Repository <input type="checkbox"/></p>	
<p>Name [REDACTED]</p>				<p>Reference No.          10496076</p>	
<p>Address [REDACTED]</p>				<p>Daytime Telephone Number [REDACTED]</p>	
<p>City WASHINGTON State IL Zip Code [REDACTED]</p>				<p>Evening Telephone Number [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><b>VEHICLE INFORMATION</b></p>					
<p>17 digit Vehicle Identification Number Located at bottom of windshield on driver's side          1FMCU04174K [REDACTED]</p>			<p>Make          FORD</p>	<p>Model          ESCAPE</p>	<p>Model Year          2004</p>
<p>Date Purchased  <b>Oct-2012</b></p>	<p>Dealer's Name and Telephone Number  <b>Wstring 309444-3151</b></p>			<p>Engine:          No: Cylinders  <b>6</b></p>	<p>Fuel Type:</p>
<p>Original Owner  <input type="checkbox"/></p>	<p>Dealer's City  <b>Wstring Washington</b></p>		<p>State  <b>IL</b></p>	<p>Zip Code  <b>61571</b></p>	<p>Incident Date(s)          08-JAN-2013</p>
<p>Transmission Type</p>	<p><input checked="" type="checkbox"/> Antilock Brakes</p>	<p>Powertrain</p>	<p>Multiple Failure:</p>		<p>Incident Date(s)          08-JAN-2013</p>
<p><input checked="" type="checkbox"/> Cruise Control</p>					
<p><b>FAILED COMPONENT(S)/PART(S) INFORMATION</b></p>					
<p>Vehicle Component Code: 140000 AIR BAGS</p>				<p>Failure Mileage          74000</p>	<p>Failure Speed          0</p>
<p><b>ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A TIRE FAILURE</b></p>					
<p>Tire Make</p>		<p>Tire Model (Name or Number)</p>		<p>Tire Size (Example P215/65R15)</p>	
<p>DOT No. (Example: DOTM9ABC036)</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><b>ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A CHILD SEAT FAILURE</b></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><b>APPLICABLE INCIDENT INFORMATION</b>          (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          0</p>	<p>Number of Deaths          0</p>	<p>Reported to Police          N</p>	
<p><b>Narrative Description of Incident(S), Crash(es), and Injury(ies).</b>          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 2004 FORD ESCAPE. THE CONTACT STATED THAT THE AIR BAG WARNING INDICATOR CONSTANTLY ILLUMINATED. THE VEHICLE WAS TAKEN TO A PRIVATE MECHANIC FOR DIAGNOSTIC TESTING. THE MECHANIC STATED THE SEAT BELT PRE-TENSIONER CONNECTORS NEEDED TO BE REPLACED. THE MANUFACTURER WAS NOT MADE AWARE OF THE FAILURE. THE VEHICLE WAS NOT REPAIRED. THE APPROXIMATE FAILURE AND CURRENT MILEAGE WAS 74,000.</p>					
<p>Include, if available: Police/Fire Department Report, Photos, and Repair Invoice. <span style="float: right;">ATTACH ADDITIONAL SHEETS IF NECESSARY</span></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 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)

Code B1877

Buckle pretensioners

driver & passenger sides

TSB 04-24-4

left front seatbelt pretensioner circuit open.  
(not working)

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

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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



Think your vehicle has a safety defect?

If so:

Use the enclosed form to file a report.

or visit:

[www.safercar.gov](http://www.safercar.gov)

or call:

Vehicle Safety Hotline  
888-327-4236

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**NHTSA**  
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[www.nhtsa.gov](http://www.nhtsa.gov)

Vehicle & Transportation Safety Administration  
U.S. Department of Transportation

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