



U.S. Department
of Transportation

National Highway
Traffic Safety
Administration

INFORMATION Redacted PURSUANT TO THE FREEDOM OF

DOT Auto Safety Hotline
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

05-APR-2013

JUN 03 2013

Repository ☐

Reference No.
10507253

OWNER INFORMATION (Type or Print)

Name [REDACTED] Daytime Telephone Number [REDACTED] E-mail Address [REDACTED]
Address [REDACTED] Evening Telephone Number [REDACTED]
City ATLANTA State GA Zip Code [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
3FAHP0HA7BR [REDACTED] Make FORD Model FUSION Model Year 2011
Date Purchased Jun 20, 2011 Dealer's Name and Telephone Number Courtesy Ford Mary Whidby-770-922-2700 Engine: No: Cylinders 4-CYL 6 Fuel Type: Regular
Original Owner ☒ Dealer's City Conyers, GA 30013 State GA Zip Code 30013
Transmission Type N/A ☐ Antilock Brakes ☐ Cruise Control Powertrain Multiple Failure: Incident Date(s) 02-APR-2013

FAILED COMPONENT(S)/PART(S) INFORMATION

Vehicle Component Code: 180000 VEHICLE SPEED CONTROL Failure Mileage Failure Speed

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) ☐ Original Equipment ☐ Prior Repair Failure Location:
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 ☒ Yes ☐ No Fire ☐ Yes ☒ No Number of Persons Injured 0 Number of Deaths 0 Reported to Police 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).

TL* THE CONTACT OWNS A 2011 FORD FUSION. THE CONTACT STATED WHILE AT A STOPLIGHT, THE VEHICLE ACCELERATED INDEPENDENTLY AND CRASHED INTO THE REAR OF ANOTHER VEHICLE THEN CONTINUED ACCELERATING UNTIL THE CONTACT PUT THE VEHICLE IN PARK. THE VEHICLE WAS NOT REPAIRED. 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.

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

On April 2, 2013 I was taking one of my co-worker up to catch his bus at the parking ride. We was sitting at the traffic light waiting for the light to change. There was Car (1) Car (2) and Car (3) me. The vehicle accelerated independently and crashed into the rear of Car (2) my foot never left the brake and I steered to the light and it was pulling hard and out of control then continue to decelerate until the contact put the vehicle in Park. The vehicle was not repaired nor the failure mileage was available.

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



NO POSTAGE
NECESSARY
IF MAILED
IN THE
UNITED STATES

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**



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



JOHN BLEAKLEY FORD, Inc.

870 Thornton Road - Phone (770) 941-9000

LITHIA SPRINGS, GEORGIA 30122

www.johnbleakleyford.com

**SERVICE DEPARTMENT HOURS**

6:00 a.m. to 7:00 p.m.

Monday - Friday

7:30 a.m. - 3:30 p.m. - Saturday

R/O Open Date	R/O Number
5/02/13	6109453/1
R/O Close Date	Status
5/08/13	Reprint
Mileage In	Mileage Out
6995	6995
Service Advisor / Tag #	
JONES, TENESHA/4738	
Vehicle Identification Number	
3FAHP0HA7BR	
Delivery Date	In-Service Date
Color	License Number

ATL, GA

Work Phone

Home Phone

Year	Make	Model	Body
2011	FORD	FUSION	4DR SDN SE FWD

DESCRIPTION OF SERVICE AND PARTS

Email: declined.com

AMOUNT

#1 - MR 99P: FREE MULTI-POINT INSPECTION
Work performed by TODD OWEN(507)

Warranty

#2 - MR Customer Reports: VEH ACCELERATES AT RANDOM
Caused by
THROTTLE BODY BAD

Corrected by 12650D: (D13) (42)

Work performed by TODD OWEN(507)

Corrected by 12650DX1:

Work performed by TODD OWEN(507)

Corrected by 12650D45:

Work performed by TODD OWEN(507)

Corrected by 9924A:

Work performed by TODD OWEN(507)

Installed DS7Z 9E926 A (FP):THROTTLE BODY AND MOTO Qty: 1

EEC TEST - P2111 - P2112 - PINPOINT TEST - REPLACE

ETB - RETEST

Warranty

Warranty

Warranty

Warranty

Warranty

* PLEASE CHECK OUR WEB SITE FOR DISCOUNTS & COUPONS *

* WWW.JOHNBLEAKLEYFORD.COM *

TERMS: STRICTLY CASH UNLESS ARRANGEMENTS ARE MADE. "I hereby authorize the repair work hereinafter to be done along with the necessary material and agree that you are not responsible for loss or damage to vehicle or articles left in the vehicle in case of fire, theft, or any other cause beyond your control or for any delays caused by unavailability of parts or delays in parts shipments by the supplier or transporter. I hereby grant you or your employees permission to operate the vehicle herein described on streets, highways, or elsewhere for the purpose of testing and/or inspection. An express mechanic's lien is hereby acknowledged on above vehicle to secure the amount of repairs thereto."

DISCLAIMER OF WARRANTIES. Any warranties on the products sold hereby are those made by the manufacturer. The seller hereby expressly disclaims all warranties either express or implied, including any implied warranty of merchantability or fitness for a particular purpose, and the seller neither assumes nor authorizes any other person to assume for it any liability in connection with the sale of said products. Any limitation contained herein does not apply where prohibited by law.

LABOR	.00
PARTS	.00
DEDUCTIBLE	.00
SUBLET	.00
SHOP SUPPLIES	.00
HAZARDOUS MATERIALS	.00
SALES TAX OR TAX I.D.	.00
SPECIAL ORDER DEPOSIT	.00
DISCOUNTS	.00
TOTAL DUE	.00

NO RETURN ON ELECTRICAL OR SAFETY ITEMS OR SPECIAL ORDERS.

X

**GEORGIA
UNIFORM TRAFFIC CITATION, SUMMONS, AND ACCUSATION**

4538391

130921792 CICA Number GAAPD0000 NCIC Number Citation Number

On Month April (Day) 2 (Yr.) 13 at 17 04 ☐ AM ☒ PM

License Class or Type C State GA Endorsements _____ Expires 2015

Operator License No. _____

Name _____ (Last, Suffix) _____ (First) _____ (Middle) BIM (Race/Sex)

Current Address _____ Apt. _____

City Atlanta State GA Zip Code _____ Phone Number _____

DOB _____ BIM Height 505 Weight 215 Eyes BRO

Veh. Yr. 2011 Make FORD Style FUSION Color GRY

Registration No. _____ Yr. 11/2013 State GA

CDL ☐ YES ☒ NO ACCIDENT ☒ YES ☐ NO INJURIES ☒ YES ☐ NO FATALITIES ☐ YES ☒ NO

☐ 2-LANE ROAD ☐ DRIVER REQUESTED ACCURACY CHECK ☐ VASCAR ☐ LASER ☐ RADAR

Within the State of Georgia, did commit the following offense: SPEEDING - Clocked by ☐ PATROL VEHICLE ☐ OTHER

(Serial # _____ Calibration/Check _____) at _____ MPH in a _____ zone

☐ DUI (Test Administered: ☐ BLOOD ☐ BREATH ☐ URINE ☐ OTHER) ☐ DUI Test Results _____

TEST ADMINISTERED BY (If Applicable): _____

OFFENSE: (Other than above) _____ Code Section _____ ☐ State Law ☒ Local Ordinance

Following too closely 40-6-49

COMPANION CASE ☐ Yes ☐ No CITATION No. / NAME: _____

REMARKS / VICTIM NAME / # _____

WEATHER	(A) ROAD	(B) TRAFFIC	LIGHTING	COMMERCIAL VIOLATION INFORMATION
☒ Clear	☒ Dry	☒ Concrete	☒ Daylight	☐ 16+ Passengers
☐ Cloudy	☐ Wet	☐ Blacktop	☐ Darkness	☐ Commercial Vehicle Violation
☐ Raining	☐ Ice	☐ Dirt	☐ Other	☐ Hazardous Material Violation
☐ Other	☐ Other	☐ Other		

In the City of Atlanta, County of Fulton, Defendant on _____

on 3600 Campbellton Rd SW Street No., Highway, Road, Street Intersection, or Private Property

Officer Name (Print) T Chapman

APD ID No. 5240 Assignment 3410 Court Code: Off days LOT Time 1500

2d Officer Name (Print) _____

APD ID No. _____ Assignment _____ Court Code: Off days _____ Time _____

You are hereby ordered to appear in court to answer this charge on the 30 day of April, Yr. 2013 at 15 00 ☐ AM ☒ PM in the MUNICIPAL COURT OF ATLANTA AT 150 GARNETT STREET, ATLANTA, Georgia, 30303. ☒ Copy ☐ Jail

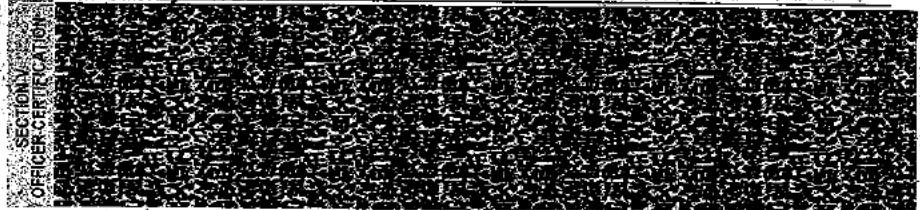
NOTICE: This citation shall constitute official notice to you that failure to appear in Court at the date and time stated on this citation to dispose of the cited charges against you shall cause the designated Court to forward your driver's license number to the Department of Driver Services, and your driver's license shall be suspended. (Georgia Code 17-6-11 and 40-5-56). The suspension shall remain in effect until such time as there is a satisfactory disposition in this matter or the Court notifies the Department of Driver Services.

LICENSE DISPLAYED IN LIEU OF BAIL: ☐ Yes ☒ No RELEASED TO _____

SIGNATURE ACKNOWLEDGES SERVICE OF THIS SUMMONS AND RECEIPT OF COPY OF SAME.

SIGNATURE _____

VIOLATOR'S COPY



NCIC Number
GAAPD0000

4538391
Citation Number

ATLANTA METRO 300

23 MAY 2013 PM 4 L



Atlanta, GA

US Department of Transportation
National Highway Traffic Safety Administration
Office of Defects Investigation, NVS-210
1200 New Jersey Avenue SE.

Washington, DC 20077-9382

200779382

