



U.S. Department of Transportation

National Highway Traffic Safety Administration

DOT Auto Safety Hotline SEP 24 2014

Vehicle Owner's Questionnaire
 To Report Vehicle Safety Defects
 1-888-DASH-2-COT
 (1-888-327-4236)
 INTERNET: www.nhtsa.dot.gov/hotline

FOR AGENCY USE ONLY 100148

Date Received	9/20/14 <input type="checkbox"/>
24 JUL 2014	Reference No. 10015901

OWNER INFORMATION (Type or Print)

Name	[REDACTED]		
Address	[REDACTED]		
City	UPPER NYACK	State	NY
Zip Code	[REDACTED]		

Daytime Telephone Number	[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 of recall or non-compliance with the routine uses described in the agency's Privacy Act notice. See 49 CFR 539.11 (Sep. 3, 2004).

VEHICLE INFORMATION

17 digit vehicle identification number located at bottom of windshield on driver's side	Make	Model	Model Year
1F0AF57R39E [REDACTED]	FORD	F 550 SD	2009
Date Purchased	Dealers Name and Telephone Number		Engine:
	Brewster Ford 845-279-2992		8 Cylinders
Original Owner <input type="checkbox"/>	Dealers City	State	Fuel Type:
	Brewster New York	NY	gas
Transmission Type	<input checked="" type="checkbox"/> Antilock Brakes	Powertrain	Multiple Failure:
Automatic	<input checked="" type="checkbox"/> Cruise Control		(Invoice Date's) 13-MAY-2014

FAILED COMPONENT(S)/PART(S) INFORMATION

Vehicle Component Codes: FUEL/PROPULSION SYSTEM (PWS); 072100 FUEL SYSTEM, GASOLINE: DELIVERY; FUEL PUMP	Failure Mileage	Failure Speed
	47608	30

ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A TIRE FAILURE

Tire Make	Tire Model (Name or Number)	Tire Size (Example P215/55R15)
DOT No. (Example: DOTPA19ABC036)	<input type="checkbox"/> Original Equipment <input type="checkbox"/> 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 Corporation Code:	Failed Part:	

APPLICABLE INCIDENT INFORMATION

(Please describe in detail the incident, failure, injuries, and damages.)

Crash <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Fat <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Number of Persons Injured	Number of Deaths	Reported to Police
		0	0	A

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 2009 FORD 550 SUPER DUTY. THE CONTACT STATED THAT WHILE DRIVING 30 MPH, THERE WAS A LOUD RATTLING SOUND AS THEN THE VEHICLE STALLED. THE VEHICLE WAS RESTARTED AND TAKEN TO THE DEALER WHERE THE MECHANIC DIAGNOSED THAT THE FUEL PUMP, FILTERS AND SENSORS NEEDED TO BE REPLACED. THE VEHICLE WAS REPAIRED AND THE MANUFACTURER WAS NOTIFIED OF THE FAILURE, WHO ADVISED THE CONTACT THAT THE PROBLEM WAS NOT COVERED UNDER THE WARRANTY. THE APPROXIMATE FAILURE MILEAGE WAS 47,608.

Upper Nyack New York

W40-304

WESTCHESTER NY 105

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