

INFORMATION Redacted PURSUANT TO THE FREEDOM OF

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



U.S. Department of Transportation

National Highway Traffic Safety Administration

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	Repository <input type="checkbox"/>
25-AUG-2014	Reference No. 10627966
OCT 09 2014	

OWNER INFORMATION (Type or Print)

Name	[REDACTED]			Daytime Telephone Number	E-mail Address
Address	[REDACTED]			[REDACTED]	NOEMAIL@UNK.GOV
City	State	Zip Code	[REDACTED]		
PINBROOK PINES	FL	[REDACTED]	[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	Make	Model	Model Year
1ZVBP8AM5D5 [REDACTED]	FORD	MUSTANG	2013
Date Purchased	Dealer's Name and Telephone Number	Engine:	Fuel Type:
6-1-2014	VERNE JONES FORD - JAW BROWN 888-904-3250	No: Cylinders 6	GAS
Original Owner <input type="checkbox"/>	Dealer's City	State	Zip Code
[REDACTED]	JASPER	GA	[REDACTED]
Transmission Type	<input checked="" type="checkbox"/> Antilock Brakes	Powertrain	Multiple Failure:
AUTOMATIC	<input checked="" type="checkbox"/> Cruise Control	[REDACTED]	SEAT BELTS SNAPPED
Incident Date(s)			06-JUN-2014

FAILED COMPONENT(S)/PART(S) INFORMATION

Vehicle Component Code: 140000 AIR BAGS	Failure Mileage	Failure Speed
[REDACTED]	28484	AT STOP SIGN

ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A TIRE FAILURE

Tire Make	Tire Model (Name or Number)	Tire Size (Example P215/65R15)
[REDACTED]	[REDACTED]	[REDACTED]
DOT No. (Example: DOTM9ABC036)	<input type="checkbox"/> Original Equipment <input type="checkbox"/> Prior Repair	Failure Location:
[REDACTED]	[REDACTED]	[REDACTED]
Tire Component Code	Tire Failure Type:	
[REDACTED]	[REDACTED]	

ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A CHILD SEAT FAILURE

Make:	Date Manufactured:	Model No./Name:
[REDACTED]	[REDACTED]	[REDACTED]
Seat Type:	Installation System:	
[REDACTED]	[REDACTED]	
Child Seat Component Code:	Failed Part:	
[REDACTED]	[REDACTED]	

APPLICABLE INCIDENT INFORMATION

(Please describe in detail the incident(s), Failure(s), Crash(es), and injury(ies).)

Crash	Fire	Number of Persons Injured	Number of Deaths	Reported to Police
<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	2	0	Y

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 OWNED A 2013 FORD MUSTANG. THE CONTACT'S VEHICLE WAS REAR ENDED BY ANOTHER VEHICLE WHILE IDLING AT A STOP SIGN. THE DRIVER SIDE AIR BAG DEPLOYED, BUT THE PASSENGER SIDE AIR BAG DID NOT DEPLOY. BOTH THE DRIVER AND THE PASSENGER SUFFERED INJURIES AND WERE TRANSPORTED TO THE HOSPITAL FOR MEDICAL ATTENTION. THE DRIVER SUSTAINED AN INJURED KNEE AND THE PASSENGER SUSTAINED A LACERATED HIP AND A FRACTURED LUMBER VERTEBRAE. A POLICE REPORT WAS FILED. THE VEHICLE WAS DESTROYED. THE MANUFACTURER WAS NOTIFIED. THE VIN WAS NOT AVAILABLE. THE FAILURE MILEAGE WAS 28,484.

IT SHOULD BE NOTED BOTH BELTS SNAPPED ON IMPACT SO OCCUPANTS NOT FULLY RESTRAINED AT IMPACT WITH EMBANKMENT.

VEHICLE WAS TOTALED & I LOST \$3,000
 on car

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 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.

Accident Number: [REDACTED] Agency NCIC: G80E10100 Accident Date: 06/06/2014 Georgia Uniform Motor Vehicle Report Continuation

OCCUPANTS:		LAST NAME	FIRST	ADDRESS	CITY	STATE	ZIP	A G E	S E X	H I G H S	P O S	INJURY	TAKEN FOR TREAT	EJECT	SAFETY EQUIP	EXTRIC	AIR BAG
												0	0	0	0		0
												0	0	0	0		0
												0	0	0	0		0
												0	0	0	0		0
												0	0	0	0		0
												0	0	0	0		0
												0	0	0	0		0
												0	0	0	0		0

Injured Taken To: _____ By: _____
 Witness - Name: _____ Address: _____
 Phone: _____

Additional Remarks:
 June 06, 2014 at 14:32 hours I, Officer Chestain #411, was dispatched to the intersection of Highway 5 South and Howard Simmons Road in reference to a two car accident that had injuries. I activated my emergency lights and sirens and was first to arrive on scene.
 I noticed a silver in color car resting front first against an embankment and immediately north was a dark in color Ford Mustang resting against an embankment. I immediately began checking on all parties involved while EMS was en-route. Once EMS arrived I began my investigation.

-----All times stated are approximate-----Nothing Further

Accident Number: [REDACTED] Agency NCIC: GA0610100 Accident Date: 06/06/2014 Motor Vehicle Report: SUPPL. NARRATIVE FULL NARRATIVE

June 06, 2014 at 14:32 hours I, Officer Chestain #411, was dispatched to the intersection of Highway 5 South and Howard Simmons Road in reference to a two car accident that had injuries. I activated my emergency lights and sirens and was first to arrive on scene.

I immediately walked to the driver of the Ford Mustang, [REDACTED], and began to speak with her. [REDACTED] was bleeding slightly from under her chin, had visible scrapes on her legs, was moaning, but was conscious. I asked her to remain as calm as possible and began speaking with the passenger [REDACTED]. [REDACTED] stated he did not know if he was hurt or not. Witnesses in the accident were immediately around the vehicle so I left to speak with the other driver [REDACTED]. [REDACTED] was conscious and answering questions, but also was complaining that she was hurt. EMS arrived on scene moments later at which time I began collecting information from the witnesses and vehicles involved.

Sgt. Mike McClure and Station 15 arrived on scene and began to direct traffic.

All witnesses agreed to the fact that the silver Mercedes, driven by [REDACTED] was traveling west on Howard Simmons Road. The witness stated that [REDACTED] slowed down at the when approaching the stop sign at the intersection of [REDACTED]. The witness stated the silver Mercedes struck the Ford Mustang in [REDACTED] causing the Mustang to travel across Old Highway 5 and strike a bank. Witnesses state the Mercedes then veered left and struck a the same bank a few feet south of the Mustang.

Driver #2, [REDACTED] and occupant, [REDACTED], stated they were stopped at the intersection when they were struck from behind and pushed into the bank across perpendicular to Old Highway 5 south. Driver #1, [REDACTED], stated she was traveling down the hill when suddenly her brakes went out. [REDACTED] stated she struck the vehicle in the rear.

No skid marks were present at the scene of the accident. However, a trail, which appeared to be fluid, was on the pavement which followed the path from the point of impact to the final resting spot of vehicle #1.

All three parties involved were transported via emergency travel to Kennestone Hospital. Next list towing company, Bears Towing, arrived on scene and removed both vehicle from the shoulder of the roadway.

When Bear's Towing removed the silver Mercedes from the ditch, Sgt. McClure opened the door to check the brakes while Gene Hightower was next to him. Sgt. McClure stated nothing appeared to be wrong with the brakes. However, further inspection will likely be needed to corroborate [REDACTED] story.

Contact information was not obtained from either driver or the occupant. Insurance information could not be located from the Ford Mustang. I will attempt to gain the information.

I typed a letter and addressed the envelope to [REDACTED] at the current address that was provided through GCIC. I asked that [REDACTED] please contact me with insurance information. I then attempted to contact [REDACTED] via telephone but was unable and left a message. I advised both parties of the case number.

-----All times stated are approximate-----Nothing Further

July 08, 2014 I, Officer Chestain #411, retrieved a statement from Bear's Garage referencing the brake issue with the Mercedes car. James Patterson, owner of Bear's garage, stated he checked the brakes on the Mercedes and the brakes appeared to be working fine, brake fluid was present, and the pedal appeared to be fine. I included the statement with this report.

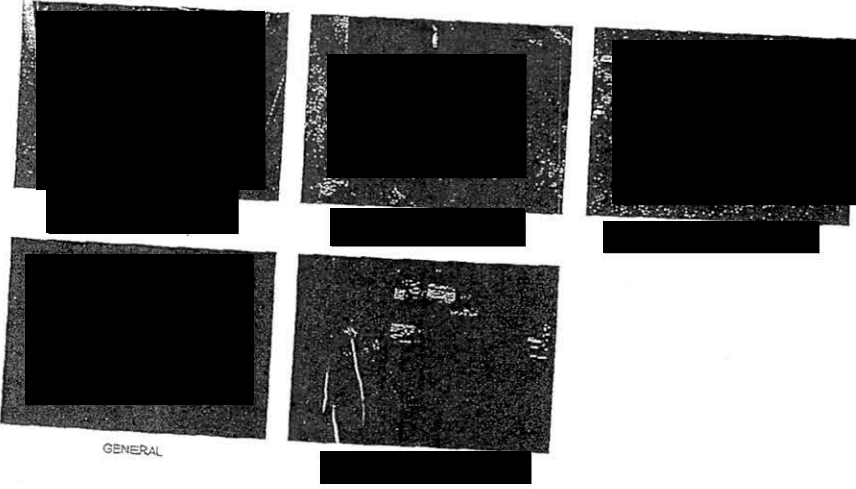
-----Nothing Further-----

AGENCY: GA0510100

Case Photos

ELLIJAY POLICE DEPARTMENT
Print Date: 07/25/2014 11:44:38 AM

CASE#: [REDACTED]



GENERAL

197 NORTH MAIN ST. ELLIJAY, GA 30606

ELLIJAY PUBLIC SAFETY

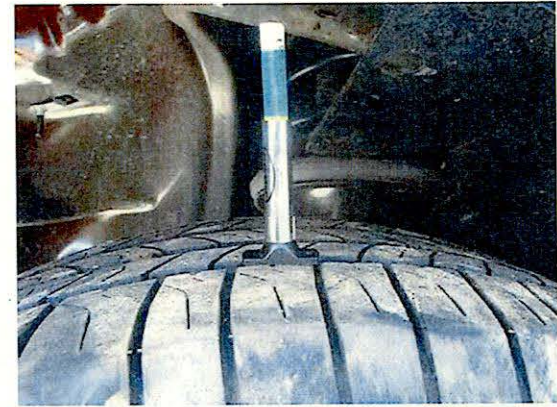
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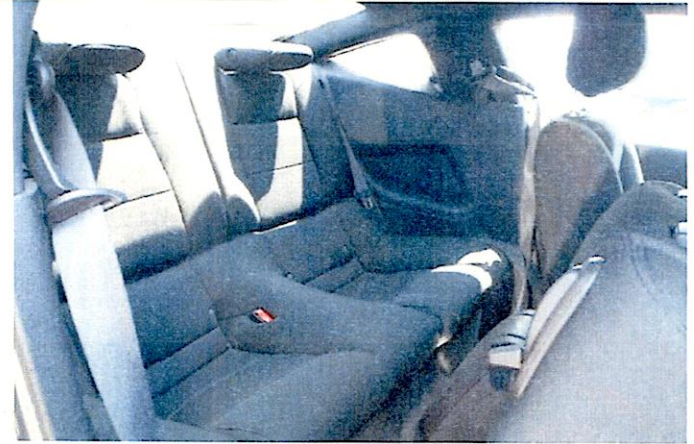
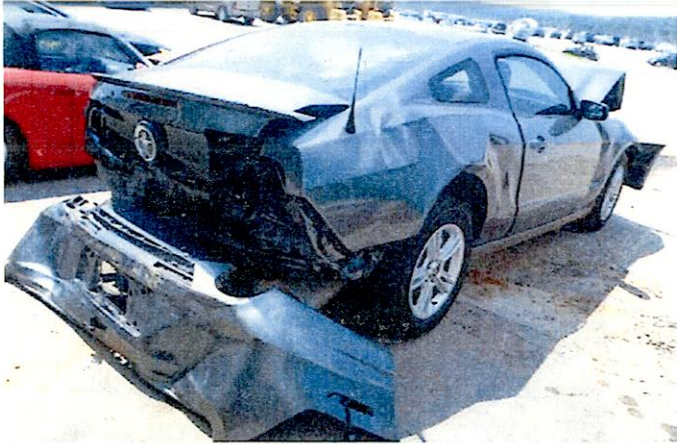
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Bristol West Insurance
P.O. Box 258806
Oklahoma City, OK 73125-8806
Fax: (855) 822-3139

July 2, 2014

██████████
ELLIJAY GA ██████████

RE: Claim Unit Number: ██████████
Insured: ██████████
Policy Number: ██████████
Loss Date: 06/06/2014

Dear ██████████

This letter is in reference to the above-mentioned claim.

Per your request, here are the photos from our inspection of your vehicle.

If you have any questions or concerns, please contact me at (954)585-5464. My scheduled office hours are Monday through Friday from 8:00 a.m. to 4:30 p.m. Eastern Time.

Sincerely,
Coast National Insurance Company

Kelby Stenger
Senior Field Claims Representative
(954)585-5464

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