


JUN 19 2015

 <b>DOT Auto Safety Hotline</b> <b>Vehicle Owner's Questionnaire</b> <b>To Report Vehicle Safety Defects</b> <b>1-888-DASH-2-DOT</b> <b>(1-888-327-4236)</b> <b>INTERNET:www.nhtsa.dot.gov/hotline</b>		FOR AGENCY USE ONLY 100148 Date Received 14-MAY-2015 Repository <input type="checkbox"/> Reference No. 10716523	
<b>OWNER INFORMATION (Type or Print)</b>			
Name		Daytime Telephone Number	E-mail Address
Address		Evening Telephone Number	
City TIPTON	State IN	Zip Code	
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).			
<b>VEHICLE INFORMATION</b>			
17 digit Vehicle Identification Number Located at bottom of windshield or driver's side 1FADP3K2XEL		Make FORD	Model FOCUS
Model Year 2014		Date Purchased AUG 2014	Dealer's Name and Telephone Number TIPTON FORD 765-675-8777
Engine: No: Cylinders 4 / 2	Fuel Type: GAS	Original Owner <input checked="" type="checkbox"/>	Dealer's City TIPTON IN
State IN	Zip Code	Transmission Type AUTO	<input checked="" type="checkbox"/> Antilock Brakes
<input checked="" type="checkbox"/> Cruise Control	Powertrain	Multiple Failure: (2x) CLUTCH	Incident Date(s) 15-SEP-2014
<b>FAILED COMPONENT(S)/PART(S) INFORMATION</b>			
Vehicle Component Codes: 110000 ELECTRICAL SYSTEM, 101000 POWER TRAIN: CLUTCH ASSEMBLY		Failure Mileage 2000	Failure Speed
<b>ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A TIRE FAILURE</b>			
Tire Make	Tire Model (Name or Number)	Tire Size (Example P215/65R15)	
DOT No. (Example: DOTM19ABC036)	<input type="checkbox"/> Original Equipment <input type="checkbox"/> Prior Repair	Failure Location:	
Tire Component Code		Tire Failure Type:	
<b>ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A CHILD SEAT FAILURE</b>			
Make:	Date Manufactured:	Model No./Name:	
Seat Type:	Installation System:		
Child Seat Component Code:	Failed Part:		
<b>APPLICABLE INCIDENT INFORMATION</b> (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			
<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).			
TL* THE CONTACT OWNS A 2014 FORD FOCUS. WHILE ACCELERATING FROM A STOP, THE ENGINE STALLED WITHOUT WARNING. THE FAILURE RECURRED NUMEROUS TIMES. THE DEALER DIAGNOSED THAT THE CLUTCH FAILED AND NEEDED TO BE REPLACED. THE VEHICLE WAS REPAIRED, BUT THE FAILURE RECURRED. THE MANUFACTURER WAS NOT MADE AWARE OF THE FAILURE AND THE VIN WAS NOT INCLUDED IN NHTSA CAMPAIGN NUMBER: 14V495000 (ELECTRICAL SYSTEM). THE FAILURE MILEAGE WAS APPROXIMATELY 2,000.			
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)

SEE DESCRIPTION BOX -

ALSO WE REPORTED THE 2ND FAILURE TO THE MFG. IN MAY BUT THE CLUTCH FAILED OR WAS FAILING WELL BEFORE MAY OF 2015 1ST FIX WAS IN THE SEP/OCT 2014 TIME FRAME WE NOTICED THE 2ND FAILURES BY NOV/DEC 2014 AND IT CONTINUED TO GET WORSE.

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

INDIANAPOLIS  
IN 460  
10 JUN '15  
PM 6 L



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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**

**NHTSA**

Vehicle Owner's Questionnaire (VOQ)  
U.S. Department of Transportation  
National Highway Traffic Safety Administration

