U.S. Department of Transportation

National Highway Traffic Safety Administration

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: 16-JUL-2015

Repository ☐

Reference No.: 10734662

OWNER INFORMATION (Type or Print)

Name [redacted]

Address [redacted]

City: ANDOVER | State: MN | Zip Code [redacted]

Daytime Telephone Number [redacted]

Evening Telephone Number [redacted]

E-mail Address [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
3FAHP08197R[redacted]	FORD	FUSION	2007

Date Purchased	Dealer's Name and Telephone Number			Engine: No: Cylinders	Fuel Type:
Original Owner ☐	Dealer's City	State	Zip Code		

Transmission Type	☐ Antilock Brakes ☐ Cruise Control	Powertrain	Multiple Failure:	Incident Date(s)
				18-MAR-2015

FAILED COMPONENT(S)/PART(S) INFORMATION

Vehicle Component Code: 140000 AIR BAGS	Failure Mileage	Failure Speed
	64000	0

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: DOTMAL9ABC036)	☐ 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	Fire	Number of Persons Injured	Number of Deaths	Reported to Police
☐ Yes ☒ No	☐ Yes ☒ No	0	0	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).

THE AIR BAG LIGHT CAME ON AND STAYED ON. I TOOK IT TO THE LOCAL FORD DEALERSHIP. THE SERVICE REP SAID THAT THE PASSENGER SEAT AIR BAG SENSOR WAS DEFECTIVE. HE SAID THAT THERE WERE NO RECALLS AND IT WOULD COST ME $868.00 TO FIX IT. I CAN'T AFFORD IT SO WE'RE DRIVING IT WITH THE LIGHT ON. I THINK FORD SHOULD REPLACE IT BECAUSE MANY PEOPLE HAVE THE SAME OR SIMILAR PROBLEM WITH THEIR FUSIONS AS WELL AS A HOST OF OTHER MAKES MAKES, MODELS, AND YEARS.

Include, if available: Police/Fire Department Report, Photos, and Repair Invoice. ATTACH ADDITIONAL SHEETS IF NECESSARY

From:	Wells, Cynthia CTR (NHTSA)
To:	Abbew, Margaret CTR (NHTSA)
Subject:	FW:
Date:	Tuesday, September 08, 2015 11:18:42 AM
Attachments:	scan0005.jpg 10734662 (1).pdf

From: Williams, Maritza CTR (NHTSA) **On Behalf Of** DataQuality, DataQuality (NHTSA)
Sent: Tuesday, September 08, 2015 10:57 AM
To: Wells, Cynthia CTR (NHTSA)
Subject: FW:

Questionnaire. Email 1of2.

Maritza L. Marshall-Williams
BLF Technologies Inc.
on assignment with National Highway Traffic Safety Administration,
Dept. Of Transportation
W48-204
maritza.williams.ctr@dot.gov
Ph: 202-493-0317
Fax: 202-366-3081

From: [redacted]
Sent: Wednesday, September 02, 2015 2:47 PM
To: DataQuality, DataQuality (NHTSA)
Subject:

RELEASE OF ALL CLAIMS

The undersigned, in consideration of the payment of $200.00 by Safelite Fulfillment, Inc., the receipt and sufficiency of which is hereby acknowledged, does hereby release and discharge Safelite Fulfillment, Inc.., its parent company, subsidiaries, affiliates, successors and assigns ("Safelite"), and each of its stockholders, directors, officers, employees, agents, and representatives, from any and all claims, known and unknown, arising out of or otherwise related to the installation or repair described in invoice number [redacted]

This release reflects a complete settlement of all such claims and is entered into freely by the undersigned. It is acknowledged that this settlement is not an admission of fault, negligence, or liability by Safelite and may not be used in any manner as proof of fault, negligence, or liability. It is acknowledged that this settlement is entered into solely to avoid the expense and uncertainty of the litigation of doubtful and disputed claims.

The undersigned acknowledges that he/she has read and fully understands the terms of this release. **This release won't void any warranty with Safelite.**

In witness whereof, the undersigned has signed this release on the date set forth below.

[redacted]

Witness

[redacted]

Customer Signature