

INFORMATION Redacted PURSUANT TO THE FREEDOM OF

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

DOT Auto Safety Hotline

FOR AGENCY USE ONLY 100148



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

Date Received 29-SEP-2015	Repository <input type="checkbox"/>
	Reference No. 10778526

OWNER INFORMATION (Type or Print)

Name		
Address		
City PITCAIRN	State PA	Zip Code

Daytime Telephone Number	E-mail Address
Evening Telephone Number	

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 1FMCU0DG6CK		Make FORD	Model ESCAPE	Model Year 2012
Date Purchased 10-15-12	Dealer's Name and Telephone Number Day Ford		Engine: No: Cylinders 4	Fuel Type: Reg Unleaded
Original Owner <input type="checkbox"/>	Dealer's City Monroeville, PA 15	State PA	Zip Code 15146	
Transmission Type 6 speed AUTO	<input checked="" type="checkbox"/> Antilock Brakes	Powertrain 54r/60,000	Multiple Failure: 37,782 464	Incident Date(s) 06-NOV-2014

FAILED COMPONENT(S)/PART(S) INFORMATION

Vehicle Component Codes: 110000 ELECTRICAL SYSTEM, 180000 VEHICLE SPEED CONTROL, ENGINE (PWS)	Failure Mileage 37782	Failure Speed 20 MPH
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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)	<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 Component Code:	Failed Part:	

APPLICABLE INCIDENT INFORMATION

(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
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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 2012 FORD ESCAPE. WHILE DRIVING 26 MPH AND TURNING TO THE LEFT, THE ENGINE STALLED. THE VEHICLE WAS RESTARTED. IN ADDITION, THE CONTACT STATED THAT THE VEHICLE ACCELERATED INDEPENDENTLY. THE VEHICLE WAS NOT DIAGNOSED OR REPAIRED. THE FAILURE MILEAGE WAS 37,782.

While driving on a few occasions and I slow down when car cuts out - (no lights or dash warning) but will restart. Thankfully has not happened in traffic.

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.



Pitcairn, PA

PITTSBURGH PA 150

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U.S. Department of Transportation

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