


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		DOT Auto Safety Hotline <b>Vehicle Owner's Questionnaire</b> 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 <b>JAN 13 2016</b> 19-NOV-2015		Repository <input type="checkbox"/> Reference No. 10794844	
OWNER INFORMATION (Type or Print)							
Name		Address		Daytime Telephone Number		E-mail Address	
City		State		Zip Code		Evening Telephone Number	
WHITTIER		CA		[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
1FADP3F22EL [REDACTED]				FORD		FOCUS	2014
Date Purchased		Dealer's Name and Telephone Number			Engine:		Fuel Type:
3-25-14		Cerritos Ford Lincoln 562-405-3500			No: Cylinders		Regular
Original Owner		Dealer's City		State	Zip Code		
<input checked="" type="checkbox"/>		Cerritos		CA	90703		
Transmission Type		Antilock Brakes		Powertrain		Multiple Failure:	Incident Date(s)
?		<input type="checkbox"/>		5/60,000			11-NOV-2015
<input type="checkbox"/>		Cruise Control					
FAILED COMPONENT(S)/PART(S) INFORMATION							
Vehicle Component Code: 010000 STEERING						Failure Mileage	Failure Speed
						8000	10
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: DOTM9ABC036)		<input type="checkbox"/> Original Equipment		Failure Location:			
		<input type="checkbox"/> Prior Repair					
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
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No					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).							
TL* THE CONTACT OWNS A 2014 FORD FOCUS. WHILE DRIVING AT 10 MPH AND ATTEMPTING TO MAKE A LEFT TURN, THE VEHICLE INDEPENDENTLY VEERED TO THE RIGHT. THE CONTACT STATED THAT THE STEERING WHEEL WOULD NOT GO BACK INTO THE DIRECTION IN WHICH IT WAS BEING TURNED. THE CONTACT THEN STATED THAT THE VEHICLE HIT A CURB AND SUBSEQUENTLY STALLED WITHOUT WARNING. THE VEHICLE WAS TOWED TO AN INDEPENDENT MECHANIC FOR DIAGNOSTIC TESTING; HOWEVER, THE DETAILS OF THE DIAGNOSIS COULD NOT BE PROVIDED. THE MANUFACTURER WAS MADE AWARE OF THE FAILURE. THE FAILURE MILEAGE WAS 8,000.							
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)

unable to attach

Narrative is correct. Attached is Repair Bill - need to get. as of 12/23/15 noticed when I step on brake steering wheel goes to the right (slightly).

Thank you

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

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US Department of Transportation National Highway Traffic Safety Administration Office of Defects Investigation, NVS-210-100 1200 New Jersey Avenue SE. Washington, D.C. 20077-9382



Think your vehicle has a safety defect?

safercar.gov



If so: Use the enclosed form to file a report.

or visit:

www.safercar.gov

or call:

Vehicle Safety Hotline 888-327-4236



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