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	Repository ☐
19-FEB-2016 APR 19 2016	Reference No. 10837123

OWNER INFORMATION (Type or Print)

Name		Daytime Telephone Number	E-mail Address
Address			
City FORT VALLEY	State GA	Zip Code	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	Make	Model	Model Year
1FAHP3FN6BW	FORD	FOCUS	2011

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) 04-JAN-2016

FAILED COMPONENT(S)/PART(S) INFORMATION

Vehicle Component Code: 162000 STRUCTURE: BODY	Failure Mileage 82423	Failure Speed

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 ☐ Yes ☒ No	Fire ☐ Yes ☒ No	Number of Persons Injured	Number of Deaths	Reported to Police
				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 2011 FORD FOCUS. THE CONTACT STATED THAT AFTER ENTERING THE VEHICLE AND CLOSING THE DRIVER SIDE DOOR, THE DOOR AJAR WARNING LIGHT REMAINED ILLUMINATED. THE FAILURE RECURRED NUMEROUS TIMES. THE VEHICLE WAS TAKEN TO THE DEALER WHERE IT WAS DIAGNOSED THAT THE DOOR LATCH FAILED AND NEEDED TO BE REPLACED. THE VEHICLE WAS NOT REPAIRED. THE MANUFACTURER WAS NOTIFIED OF THE FAILURE. THE FAILURE MILEAGE WAS 82,423.

The vehicle was repaired on 2/22/16 at Jeff Smith Ford
The cost for repair was
$430.82
230 Hwy 49 N
Byron, GA 31008

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

JEFF SMITH FORD
230 HWY 49N
BYRON, GA 31008
(478) 956-4007

CELL: [redacted]

CUSTOMER NO. [redacted]	ADVISOR CHAD	124	TAG NO. 77	INVOICE DATE 02/22/16	[redacted]
[redacted]	LABOR RATE	LICENSE NO.	MILEAGE 82,492	COLOR /	STOCK NO.
FT. VALLEY, GA [redacted]	YEAR / MAKE / MODEL 11/FORD/FOCUS/4DR SDN SE			DELIVERY DATE	DELIVERY MILES
	VEHICLE I.D. NO. 1FAHP3FN6BW [redacted]			SELLING DEALER NO.	PRODUCTION DATE
	F.T.E. NO.	P.O. NO.		R.O. DATE 02/19/16	
RESIDENCE PHONE	BUSINESS PHONE	COMMENTS			MO: [redacted]

TOTALS----------

TOTAL LABOR....	262.50
TOTAL PARTS....	149.75
TOTAL SUBLET...	0.00
TOTAL G.O.G....	0.00
TOTAL MISC CHG.	26.25
TOTAL MISC DISC	-20.00
TOTAL TAX.....	12.32
TOTAL INVOICE $	**430.82**

****
* [ ] CASH [ ] CHECK CK NO. [ ] *
* [ ] VISA [ ] MASTERCARD [ ] AMEXP *
* [ ] OTHER [ ] CHARGE [ ] DISCOVER *
****

WE APPRECIATE YOUR BUSINESS HERE AT JEFF SMITH FORD!!!!!
---------- THANK YOU ----------
FROM THE SERVICE AND PARTS DEPARTMENT
JOHN JOHNSON GREG MCKINNEY
SERVICE MANAGER PARTS MANAGER

CUSTOMER SIGNATURE

ON BEHALF OF SERVICING DEALER, I HEREBY CERTIFY THAT THE INFORMATION CONTAINED HEREON IS ACCURATE UNLESS OTHERWISE SHOWN. SERVICES DESCRIBED WERE PERFORMED AT NO CHARGE TO OWNER. THERE WAS NO INDICATION FROM THE APPEARANCE OF THE VEHICLE OR OTHERWISE, THAT ANY PART REPAIRED OR REPLACED UNDER THIS CLAIM HAD BEEN CONNECTED IN ANY WAY WITH ANY ACCIDENT, NEGLIGENCE OR MISUSE. RECORDS SUPPORTING THIS CLAIM ARE AVAILABLE FOR (1) YEAR FROM THE DATE OF PAYMENT NOTIFICATION AT THE SERVICING DEALER FOR INSPECTION BY MANUFACTURER'S REPRESENTATIVE.

(SIGNED) DEALER, GENERAL MANAGER OR AUTHORIZED PERSON

(DATE)

STATEMENT OF DISCLAIMER

The factory warranty constitutes all of the warranties with respect to the sale of this item/items. The Seller hereby expressly disclaims all warranties either express or implied, including any implied warranty of merchantability or fitness for a particular purpose. Seller neither assumes nor authorizes any other person to assume for it any liability in connection with the sale of this item/items.

CUSTOMER SIGNATURE