



INFORMATION ACT (FOIA) 5 USC 552(B)(6)

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	Repository <input type="checkbox"/>
16-NOV-2016 JAN - 4 2017	Reference No. 10926460

OWNER INFORMATION (Type or Print)

Name				Daytime Telephone Number	E-mail Address
Address					
City	ABINGDON	State	MD	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 1FTZR45E64F	Make FORD	Model RANGER	Model Year 2004
Date Purchased 5-18-15	Dealer's Name and Telephone Number Hinder Ford Inc. 410-272-2200		Engine: No: Cylinders 6
Original Owner <input type="checkbox"/> NO	Dealer's City Aberdeen	State MD	Zip Code 21001
Transmission Type	<input checked="" type="checkbox"/> Antilock Brakes <input checked="" type="checkbox"/> Cruise Control	Powertrain	Multiple Failure: Incident Date(s) 16-NOV-2016

FAILED COMPONENT(S)/PART(S) INFORMATION

Vehicle Component Code: 140000 AIR BAGS Driver Air Bag	Failure Mileage	Failure Speed
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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: DOTM9ABC036)	<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	Number of Deaths	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 2004 FORD RANGER. THE CONTACT RECEIVED NOTIFICATION OF NHTSA CAMPAIGN NUMBER: 16V036000 (AIR BAGS); HOWEVER, THE PART TO DO THE REPAIR WAS UNAVAILABLE. THE CONTACT STATED THAT THE MANUFACTURER EXCEEDED A REASONABLE AMOUNT OF TIME FOR THE RECALL REPAIR. THE MANUFACTURER WAS MADE AWARE OF THE ISSUE. THE CONTACT HAD NOT EXPERIENCED A FAILURE.

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.

Recalls



2004 Ford Ranger ▾

Last updated 05/16/2016

We found the following field service action listed on your vehicle.

**VIN:** 1FTZR45E64P [REDACTED]**Recall Date:** JAN 22, 2016**Recall Title:** DRIVER AIRBAG INFLATOR REPLACEMENT**NHTSA Recall Number:** 16V036**Ford Recall Number:** 16S03**Recall Description:** DRIVER AIRBAG INFLATOR REPLACEMENT**Risk to Safety:** THE DRIVER SIDE AIRBAG INFLATOR COULD RUPTURE IF THE VEHICLE IS INVOLVED IN A CRASH WHERE THE SUPPLEMENTAL FRONTAL AIRBAGS ARE DESIGNED TO DEPLOY. IF THIS OCCURS, IT MAY INCREASE THE RISK OF INJURY OR DEATH TO THE OCCUPANTS.**Remedy Program:** OWNERS WILL BE NOTIFIED BY MAIL AND INSTRUCTED TO TAKE THEIR VEHICLE TO A FORD OR LINCOLN DEALER TO HAVE THEIR DRIVER AIRBAG INFLATOR REPLACED. THERE WILL BE NO CHARGE FOR THIS SERVICE. FORD IS EXCLUDING REIMBURSEMENT FOR COSTS BECAUSE THE ORIGINAL WARRANTY PROGRAM WOULD PROVIDE FOR A FREE REPAIR FOR THIS CONCERN. FORD WILL FORWARD A COPY OF THE NOTIFICATION LETTERS TO DEALERS TO THE AGENCY WHEN AVAILABLE.**Status:** 12 - RECALL INCOMPLETE. REMEDY NOT YET AVAILABLE.**Manufacturer Notes:** TO CHECK FOR NON-SAFETY-RELATED PROGRAMS APPLICABLE TO YOUR VEHICLE, SEE [HTTP://WWW.FORD.COM/](http://www.ford.com/) OR CALL YOUR FORD DEALER.

Be advised that this system tracks Recalls and Customer Satisfaction Programs for which vehicles are subject to repair in the United States. The information provided is subject to change and update. There may be temporary delays in update of information on this site due to a number of factors. For the latest information regarding the status of your vehicle or any recall program of Ford Motor Company, please contact your local dealership directly or the Customer Relationship Center.

A recall is an action by the Company to remedy a safety concern related to a vehicle defect or regulatory requirement. It may require that you return your vehicle to the dealer for service. If your vehicle is not affected, it may be