



U.S. Department of Transportation  
National Highway Traffic Safety Administration

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

**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  
13-JAN-2017

Repository   
Reference No.  
10945020

**OWNER INFORMATION (Type or Print)**

Name [Redacted]  
Address [Redacted]  
City DAYTON State OH Zip Code [Redacted]

Daytime Telephone Number [Redacted]  
Evening Telephone Number

E-mail Address

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  
1ZVBP8EM9D5 [Redacted] Make FORD Model MUSTANG Model Year 2013  
Date Purchased NOV 2014 Dealer's Name and Telephone Number TOWN SEND FORD Engine: No: Cylinders 6 Fuel Type: GAS  
Original Owner  Dealer's City VANDALIA State OH Zip Code  
Transmission Type  Antilock Brakes Powertrain Multiple Failure: Incident Date(s) 27-MAY-2015  
 Cruise Control

**FAILED COMPONENT(S)/PART(S) INFORMATION**

Vehicle Component Code: 140000 AIR BAGS Failure Mileage 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: DOTM9ABC036)  Original Equipment Failure Location:  
 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  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\* TAKATA RECALL. THE CONTACT OWNS A 2013 FORD MUSTANG. THE CONTACT RECEIVED NOTIFICATION OF NHTSA CAMPAIGN NUMBER: 15V319000 (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. PARTS DISTRIBUTION DISCONNECT.

1-23-17 AIRBAG PROBLEM FIXED! THANKS TO YOU.

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.