



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 <input type="checkbox"/>
13-AUG-2018	Reference No. 11119536
OCT 15 2018	

OWNER INFORMATION (Type or Print)

Name	[REDACTED]			Daytime Telephone Number	E-mail Address
Address	[REDACTED]			[REDACTED]	
City	State	Zip	Evening Telephone Number		
CHESEPEAKE	VA	[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
LFTYR44U95F [REDACTED]	FORD	RANGER	2005
Date Purchased	Dealer's Name and Telephone Number	Engine:	Fuel Type:
2010	PRIVATE OWNER	No: Cylinders	
Original Owner	Dealer's City	State	Zip Code
<input type="checkbox"/>			
Transmission Type	Antilock Brakes	Powertrain	Multiple Failure:
	<input type="checkbox"/> Cruise Control		Incident Date(s)
			02-JAN-2018

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: 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	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* TAKATA RECALL. THE CONTACT OWNS A 2005 FORD RANGER. THE CONTACT STATED THAT THE RECALL NOTICE FOR NHTSA CAMPAIGN NUMBER: 17V788000 (AIR BAGS) WAS RECEIVED IN JANUARY OF 2018. THE LOCAL DEALER (CAVALIER FORD AT CHESAPEAKE SQUARE, 4021 PORTSMOUTH BLVD, CHESAPEAKE, VA) WAS CONTACTED AND STATED THAT THE PARTS NEEDED TO REPAIR THE RECALL WERE NOT AVAILABLE. THE MANUFACTURER WAS NOT NOTIFIED. THE CONTACT HAD NOT EXPERIENCED A FAILURE. PARTS DISTRIBUTION DISCONNECT.

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.

Narrative Description of Incident(s), Failure(s), Crash(es), and Injury(ies)

NO FAILURE IN AIR BAG. REPLACED BY
CAVALIER FORD IN AUG. 2018.

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

POSTNET

WA 230

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NECESSARY
IF MAILED
IN THE
UNITED STATES

BUSINESS REPLY MAIL

FIRST CLASS MAIL PERMIT NO. 1888 WASHINGTON, DC

POSTAGE WILL BE PAID BY ADDRESSEE

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



**Think your vehicle
has a safety defect?**

If so:

**Use the enclosed
form to file a report.**



or visit:

www.safercar.gov

or call:

**Vehicle Safety Hotline
888-327-4236**



Vehicle Owner's Questionnaire (VOQ)
U.S. Department of Transportation
National Highway Traffic Safety Administration

safercar.gov