

DOT Auto Safety Hotline				FOR AGENCY USE ONLY 100148	
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 MAR 03 2020	Repository ☐
				11-SEP-2019	Reference No. 11254747
OWNER INFORMATION (Type or Print)				Daytime Telephone Number	E-mail Address
Name [REDACTED]				[REDACTED]	[REDACTED]
Address [REDACTED]				Evening Telephone Number	[REDACTED]
City BRANSON		State MO	Zip Code [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 1FDWE3F673D [REDACTED]			Make FORD	Model E-350	Model Year 2018
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	Powertrain	Multiple Failure:		Incident Date(s) 08-AUG-2019
	☐ Cruise Control				
FAILED COMPONENT(S)/PART(S) INFORMATION					
Vehicle Component Codes: 100000 POWER TRAIN, 030000 BRAKES (PWS)				Failure Mileage 4200	Failure Speed 30
ABS Light was ON.					
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)	☐ 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 1	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; e.g., parts repaired or replaced (and if old part is available).					
TL* THE CONTACT OWNS A 2018 FORD E-350. THE CONTACT STATED THAT WHILE TRAVELING AT A LOW RATE OF SPEED, THE CONTACT ATTEMPTED TO STOP THE VEHICLE BY DEPRESSING THE BRAKE PEDAL; HOWEVER THE VEHICLE FAILED TO OPERATE AS NEEDED. THE VEHICLE INSTEAD ACCELERATE FORWARD WHILE TRAVELING APPROXIMATELY 30 MPH. THE VEHICLE WENT INTO AN EMBANKMENT, DID NOT COLLIDE OR HIT ANYTHING, NO FRONT END DAMAGE, HOWEVER THE REAR OF THE VEHICLE WAS DAMAGED. THE AIR BAGS DID NOT DEPLOY DUE TO NO COLLISION, A POLICE REPORT WAS FILED [REDACTED] THE CONTACT WAS TAKEN TO A LOCAL HOSPITAL AND SUSTAINED A FRACTURED BACK. THE CAUSE OF THE VEHICLE FAILURE WAS UNKNOWN. THE VEHICLE WAS TOWED TO A LOCAL BODY SHOP AND THEN TO A DEALER (TRI-LAKES MOTORS 180 STATE HIGHWAY F, BRANSON, MO 65616 417-334-7543). VIN NUMBER WAS UNAVAILABLE TO SEARCH IF THERE WAS A RECALL PLACED ON THE VEHICLE. THE MANUFACTURER WAS NOT NOTIFIED OF THE FAILURE. THE VEHICLE WAS NOT REPAIRED. THE APPROXIMATE FAILURE MILEAGE WAS 4,200. I WAS PARKED WHEN I PUT IN DRIVE, I WAS NOT TRAVELING AS STATED ABOVE.					
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, as 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)

THIS TRUCK IS A COMPANY TRUCK. VIN# IS ON THE OTHER
SIDE OF THIS PAPER. THE LICENSE PLATE IS MISSOURI [REDACTED]
I WAS THE DRIVER OF THIS TRUCK. I STARTED THE TRUCK
WITH MY FOOT ON THE BRAKE. I PUT THE TRUCK IN DRIVE.
AS SOON AS I DID THIS, I FELT I WAS ALREADY GOING
15 MPH. COULD NOT STOP TRUCK. TRUCK DID HAVE A BUMPER
DENT, BUT IT LOOK LIKE I MISSED HITTING AIRBAG SENSOR.
NO OTHER PANEL LIGHTS CAME ON OTHER THAN ABS.
POSSIBLE PROBLEM COULD OF BEEN ACCELERATOR PEDAL POSITION SENSOR
THROTTLE BODY, ^{MASS AIR} FLOW SENSOR ATTACH ADDITIONAL SHEETS IF NECESSARY. THROTTLE CONTROLLER

U.S. Department
of Transportation

National Highway
Traffic Safety
Administration

1200 New Jersey Avenue SE.
Washington, D.C. 20077-9382

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Penalty for Private Use \$300

SPRINGFIELD

MO 658

18 DEC '10



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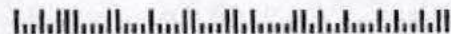


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US Department of Transportation
National Highway Traffic Safety Administration
Office of Defects Investigation, NEF-100
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Washington, D.C. 20077-9382



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



www.nhtsa.gov

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

