

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

From: [DataQuality, DataQuality \(NHTSA\)](#)
To: [EVOQ \(NHTSA\)](#)
Subject: FW: Follow up to ODI Complaint -----11348873 -----
Date: Wednesday, September 2, 2020 12:16:13 PM
Attachments: [REDACTED]

From: [REDACTED]
Sent: Wednesday, September 02, 2020 1:31 AM
To: DataQuality, DataQuality (NHTSA) <DataQuality@dot.gov>
Subject: Fwd: Follow up to ODI Complaint -----11348873 -----

CAUTION: This email originated from outside of the Department of Transportation (DOT). Do not click on links or open attachments unless you recognize the sender and know the content is safe.

Begin forwarded message:

From: "EVOQ (NHTSA)" <EVOQ@dot.gov>
Date: September 1, 2020 at 1:02:21 PM EDT
To: [REDACTED]
Subject: FW: Follow up to ODI Complaint -----11348873 -----

Please see the attached copy of your recent complaint and instructions. Please make any necessary edits and return via email to dataquality@dot.gov or fax to (202) 366-1767. Due to the volume of complaints we receive and our limited resources, we cannot respond to every complaint.
NHTSA/Office of Defects Investigation



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"/> |
| 12-AUG-2020 | Reference No. 11348873 |

OWNER INFORMATION (Type or Print)

| | | |
|----------------|--------------------------|----------------|
| Name | Daytime Telephone Number | E-mail Address |
| Address | | |
| City HOLLYWOOD | State SC | 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 1FADP3F26JL | Make FORD | Model FOCUS | Model Year 2018 |
| Date Purchased | Dealer's Name and Telephone Number | Engine: No: Cylinders | Fuel Type: |
| Original Owner <input type="checkbox"/> | Dealer's City | State | Zip Code |
| Transmission Type <input type="checkbox"/> Antilock Brakes <input type="checkbox"/> Cruise Control | Powertrain | Multiple Failure: | Incident Date(s) 01-APR-2020 |

FAILED COMPONENT(S)/PART(S) INFORMATION

| | | |
|--|--------------------------|---------------|
| Vehicle Component Codes: 100000 POWER TRAIN, 060000 ENGINE (PWS) | Failure Mileage 60000 | 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) | <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 |
|--|---|---------------------------|------------------|-------------------------|

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 2018 FORD FOCUS. THE CONTACT STATED THAT AFTER REFUELING, THE ENGINE WOULD NOT IMMEDIATELY START. THE FAILURE WAS ONLY PRESENT WHEN REFUELING MORE THAN A HALF TANK OF FUEL. ALSO, WHILE DRIVING AT VARIOUS SPEEDS, THE VEHICLE WOULD SUDDENLY SHUTOFF AND THE MESSAGE TRANSMISSION NOT IN PARK WOULD BE DISPLAYED. THE CAUSE OF THE FAILURES WERE NOT DETERMINED. THE LOCAL DEALER PALMETTO FORD LOCATED AT 1625 SAVANNAH HWY, CHARLESTON SC 29407 AND THE MANUFACTURER WERE NOTIFIED OF THE FAILURES BUT NO ASSISTANCE WAS OFFERED. THE CONTACT WAS INFORMED THAT THE VEHICLE WAS NOT INCLUDED IN THE NHTSA CAMPAIGN NUMBER 18V735000 (FUEL SYSTEM). THE CONTACT STATED THAT THE VEHICLE HAD EXPERIENCED THE SAME FAILURE LISTED IN THE RECALL. THE FAILURE MILEAGE WAS 60,000.

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.