



U.S. Department of Transportation

DOT Auto Safety Hotline Vehicle Owner's Questionnaire To Report Vehicle Safety Defects

Date Received
Form Approved: O.M.B No.2127-0008

Repository

29-DEC-2022
**National Highway
Traffic Safety Administration
(1-888-327-4236)
INTERNET:www.nhtsa.dot.gov/hotline**

E-mail Address

OWNER INFORMATION (Type or Print)

Daytime Telephone Number
Reference No. 11499332

Address [REDACTED]
City
Glen Arm
[REDACTED]

State	MD	ZIP Code	[REDACTED]
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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 1FTLR4FE0AF [REDACTED] MAKE FORD Model

RANGER
Model Year 2010

Dealer's Name and Telephone Number Liberty Ford of Randallstown MD 21133		Engine: No: Cylinders 6	
Dealer's City Baltimore	STATE MD	ZIP Code 21133	

Date Purchased Fuel Type:

Original Owner

Transmission Type Powertrain Multiple Failure: Incident Date(s) Antilock Brakes

Cruise Control
08-DEC-2022

FAILED COMPONENT(S)/PART(S) INFORMATION

Failure Mileage 55000.0

Vehicle Components Codes: 161000 STRUCTURE:FRAME AND MEMBERS Failure Speed

ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A TIRE FAILURE

Tire Make Tire Model (Name or Number) Tire Size (Example P215/65R15)

Original Requirement Prior Repair

DOT No. (Example: DOTMAL 9ABC036) 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), 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), 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).

The contact owns a 2010 Ford Ranger. The contact stated that the undercarriage was rusted. The contact stated that the fuel tank brackets had detached from the subframe. The vehicle was leaking fuel. The vehicle was towed to an independent mechanic and the contact was informed that the vehicle was unsafe to drive. The mechanic suggested that the subframe be rebuilt. The contact called the local dealer but the vehicle was not diagnosed or repaired. The manufacturer was contacted and referred to the NHTSA Hotline. The failure mileage was approximately 55,000.

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 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.**