

INFORMATION REDACTED PURSUANT TO THE FREEDOM OF INFORMATION ACT (FOIA), 5 U.S.C.552(B)(6)

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

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 31-MAY-2023  
Repository   
Reference No. 11524635

OWNER INFORMATION (Type or Print)

Name [Redacted]  
Address [Redacted]  
City Tallahassee State FL ZIP Code [Redacted]  
Daytime Telephone Number [Redacted] E-mail Address [Redacted]  
Evening Telephone Number [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 1FDXE45S45H [Redacted]  
MAKE FORD Model E-450 Model Year 2005  
Date Purchased Dealer's Name and Telephone Number  
Original Owner  Dealer's City Richardson STATE TX ZIP Code 75080  
Transmission Type  Antilock Brakes  Cruise Control Powertrain Multiple Failure: Incident Date(s) 29-APR-2023  
Engine: No: Cylinders 10 Fuel Type: GAS

FAILED COMPONENT(S)/PART(S) INFORMATION

Vehicle Components Codes: 162000 STRUCTURE:BODY Failure Mileage 125000.0 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: DOTM1 9ABC036)  Original Requirement  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), 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 owned a 2015 Fiat 500C being towed by a 2005 Ford E-450. The contact stated that while driving approximately 70 MPH, the Fiat detached from the Ford at the tow bar without warning. No other vehicles were struck due to the failure. There were no injuries were reported. There was no police report filed. The 2015 Fiat 500C was removed from the tow bar and the vehicle was towed to an independent mechanic where it was destroyed. Neither the dealer nor the manufacturers of the vehicles were notified of the failure. The failure mileage for the 2015 Fiat 500 was 134,000. The failure mileage for 2005 Ford E-450 was 125,000.

DETACHED AT THE HITCH RECEIVER SQUARE TUBE (WELDED TO CROSSBAR) (WELD) (BROKE) I HAVE PHOTOS AT TIME OF FAILURE AND POSSES FAILED COMPONENTS!

