

COPIED
DOT Auto Safety Hotline
Vehicle Owner's Questionnaire
TO REPORT VEHICLE SAFETY DEFECTS
 1-888-DASH-2-DOY
 (1-888-327-4236)
 INTERNET: www.nhtsa.dot.gov/hotline

FOR AGENCY USE ONLY

Date Received: **564431**

Reference No. **02-141**

DATE RECEIVED
 FEB 19 2002

OWNER INFORMATION

Name: [REDACTED]

Address: [REDACTED]

City/State/Zip: [REDACTED]

Do you intend to provide a copy of this report to the manufacturer of your vehicle? ☒ YES ☐ NO

In the absence of an authorized, NHTSA WILL NOT provide your name or address to the vehicle manufacturer.

Signature of Owner: [REDACTED] Date: **2/16/02**

PRODUCT INFORMATION

Vehicle Identification No. (VIN): [REDACTED] (Located at bottom of windshield on driver's side)

Make: **Ford** Model: **Focus** Year: **2001**

Purchased Date: **2/2001** Dealer's Name: **Kip Kilman Ford** Dealer's City: **Tysons Virginia** State: **Va** Zip Code: [REDACTED]

Engine Size (CID/GAL): [REDACTED] Turbo Diesel Gas ☐ Fuel Injection ☐

Manufacture Date (on driver's door or plate): [REDACTED] Transmission Type: ☒ Manual ☐ Automatic

Restraint System: ☒ Driver's Air Bag ☐ Passenger's Air Bag ☐ 2-Point Belt ☐ 3-Point Belt

Crash Control: ☐ Yes ☒ No

Drivetrain: ☒ Front ☐ Rear ☐ All-wheel

Vehicle Type: ☒ Car ☐ Sport Utility ☐ Van ☐ Truck ☐ Motorcycle ☐ Other

Body Style: ☐ 2-Door ☒ 4-Door ☐ Station Wagon ☐ Pick Up Truck ☐ Other

FAILED COMPONENT(S)/PART(S) INFORMATION

Part Name(s): **Air bag deployment** Location: ☒ Left ☐ Right ☐ Front ☐ Rear

Failed Part(s): ☒ Original ☐ Replacement

Manufacturer's Adaptive Equiv: ☐ Yes ☒ No

TO BE COMPLETED WHEN REPORTING A TIRE FAILURE

Tire Brand: [REDACTED] Tire Name: [REDACTED]

Complete Tire Size: [REDACTED] DOT No: [REDACTED]

No. of Failures: [REDACTED] Date(s) of Failure(s): [REDACTED] Mileage at Failure(s): [REDACTED] Vehicle Speed at Failure(s): [REDACTED]

Partial Part(s) Available? ☐ Yes ☒ No

NHTSA Previously Contacted? ☐ Yes ☒ No

APPLICABLE INCIDENT INFORMATION

(Please describe in detail the incident(s), failure(s), crash(es), and injury(ies). Attach photos if available.)

Crash: ☒ Yes ☐ No

Fire: ☐ Yes ☒ No

Number of Persons Injured: **2** Number of Fatalities: **0**

Reported to Manufacturer: ☒ Yes ☐ No

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

The incident occurred during an approx 3 mile race and bump. The air bag deployed injuring the driver & passenger. The windshield shattered covering the occupants with glass (even in their mouths) the bumpers on the driver's side were punctured and the passenger had severe fire burn & injuries that required her to be transported to the hospital and is now seeing a plastic surgeon.

The Privacy Act of 1974 - Public Law 93-579 This information is requested pursuant to 49 U.S.C. Chapter 301. You are under no obligation to respond to this questionnaire. Your response may be used to assist NHTSA in determining whether a manufacturer should take appropriate action to correct a safety defect. If 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.

Mail postage free or fax to 202-366-7002

I do not have the car to get the #'s I can get them if you need them