



**DOT Auto Safety Hotline  
Vehicle Owner's Questionnaire**  
TO REPORT VEHICLE SAFETY DEFECTS  
1-888-DASH-2-DOT  
(1-888-327-4238)

FOR AGENCY USE ONLY

Date Reported

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OWNER INFORMATION (Type or Print)

Name: [Redacted]  
Address: [Redacted]  
City: AUSTELL State: GA

OFFICE  
DEFECTS INVESTIGATION  
DEFECTS

10003666

Do you authorize NHTSA to provide a copy of this report to the manufacturer of your vehicle?  YES  NO  
In the absence of an authorization, NHTSA WILL NOT provide your name or address to the vehicle manufacturer.

Signature of Owner: [Redacted] Date: 1/1/2003

PRODUCT INFORMATION

Vehicle Identification No. (VIN) (17 Digits): 1FTEF1EN5CNA02153 Make: FORD Model: F-150 Year: 1995

Purchased Date: \_\_\_\_\_ Dealer's Name: STONE MOUNTAIN FORD Single Size (W/H/O/C/L): \_\_\_\_\_  Turbo  Diesel  Gas  Fuel Injection

New  Used Dealer's City: STONE MOUNTAIN State: GA Zip Code: 30133 No. Cylinders: 8

Manufacture Date (on driver's door or pillar): 08-94 Transmission Type:  Manual  Automatic Restraint System:  Driver's Side Air Bag  None  Passenger's Side Air Bag  2-Point Belt  3-Point Belt Cruise Control:  Yes  No Drivetrain:  Front  Rear  4-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): \_\_\_\_\_ Location:  Left  Right Failed Part(s):  Original  Handicap Adaptive Equip:  Yes  No

TO BE COMPLETED WHEN REPORTING A TIRE FAILURE

Tire Brand: \_\_\_\_\_ Tire Name: \_\_\_\_\_ Complete Tire Size: \_\_\_\_\_

No. of Failures: \_\_\_\_\_ Date(s) of Failure(s): \_\_\_\_\_ Mileage at Failure(s): \_\_\_\_\_ Vehicle Speed at Failure(s): \_\_\_\_\_ Failed 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: NONE Number of Facilities: NONE Reported to Manufacturer:  Yes  No

Narrative Description of Incident(s), Failure(s), Crash(es), and Injury(ies):  
On November 17th 2003 I parked my truck outside the garage of my home at 10:00 pm On November 18th Sunday morning at 4:00 AM I woke up to a fire coming from my truck. And the fire department was there at 4:10 AM. Fire inspectors check out the fire and determined the fire began under the hood as passenger side

Continue on back.

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.