



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 100184

Date Received

2003 NOV 25
24-OCT-2003

Repository ☐

Reference No.
10044700

OWNER INFORMATION (Type or Print)

Name

Address

City

HUNTINGDON VALLEY

State PA

Zip Code

Daytime Telephone Number

E-mail Address

Evening Telephone Number

SAME

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

In the absence of an authorized signature, you must provide your name or address to the vehicle manufacturer.

Signature of Owner

Date 11/7/03

VEHICLE INFORMATION

17 digit Vehicle Identification Number located at bottom of windshield on driver's side

1LNBM81F4KY643528

Make

LINCOLN

Model

TOWN CAR

Model Year

1999

Date Purchased

5/2/98

Dealer's Name and Telephone Number

FRED BEANS 215-348-2900

Engine

No. Cylinders

8

Fuel Type:

Original Owner

Dealer's City

DOYLESTOWN, PA

State

PA

Zip Code

18901

Transmission Type

AUTOMATIC

☐ Anti-lock Brakes

☒ Cruise Control

Powertrain

Vehicle Component Code

114000 ELECTRICAL SYSTEM: WIRING

Multiple failure: 1

FAILED COMPONENT(S)/PART(S) INFORMATION

Incident Date(s)

13-OCT-2003

Failure Mileage

76000

Failure Speed

45 MPH

WIRING HARNESS UNDER HOOD OF A
DRIVER'S SIDE ALSO BLOWING FIRE
W/ OTHER DAM. ADJACENT ITEMS

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: DOTM15ABC036)

☐ Original Equipment

☐ 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

☐ Yes ☒ No

Fire

☒ Yes ☐ No

Number of Persons Injured

Number of Deaths

Reported to Police

0

0

Y

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).

AFTER PARKING THE VEHICLE AND TURNING OFF THE IGNITION, THE CONSUMER HEARD A POPPING SOUND. A FEW SECONDS HAD PASSED AND THE CONSUMER SAW THICK BLACK SMOKE AND A FIRE COMING FROM THE ENGINE COMPARTMENT. THE FIRE WAS EXTINGUISHED AND THE VEHICLE WAS TAKEN TO THE DEALER. THE DEALER INFORMED THE CONSUMER THAT THE PROBLEM MAY HAVE BEEN THE WIRING HARNESS. *JB

IT IS POSSIBLE THAT THE WIRING HARNESS MIGHT HAVE BEEN AFFECTED BY SOME OTHER CAUSE - (RELAXED BY SOME OTHER COMPONENT)

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.

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

ON 10/13/03 WHILE DRIVING TO A FUNERAL IN MOUNT SHARON CEMETERY, SPRINGFIELD ROAD + WEST AVE, SPRINGFIELD, PA, I NOTICED AN ERRATIC FEELING IN STEERING + ACCELERATION. AS I PULLED INTO CEMETERY + TURNED OFF THE IGNITION I SAW BLACK SMOKE EMANATING FROM UNDER THE HOOD ON THE DRIVER'S SIDE + THEN FIRE ERUPTING. LUCKILY THERE WERE SOME CEMETERY WORKERS THERE WHO SAW THIS OCCUR + WHEN RETURNED WITH AN EXTINGUISHER TO PUT OUT THE FIRE THE FIRE WAS IN THE WIRING HARNESS.

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U.S. Department
of Transportation

National Highway
Traffic Safety
Administration

400 Seventh St., S.W.
Washington, D.C. 20590

Official Business
Penalty for Private Use \$300

BUSINESS REPLY MAIL

FIRST CLASS PERMIT NO 73173 WASHINGTON, D.C.

POSTAGE WILL BE PAID BY NATL. HWY. TRAFFIC SAFETY ADMIN.

U.S. Department of Transportation
National Highway Traffic Safety Administration
Office of Defects Investigation, NVS-216
400 7th Street, SW
Washington, DC 20590

NO POSTAGE
NECESSARY
IF MAILED
IN THE
UNITED STATES

**VEHICLE
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QUESTIONNAIRE**

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OR

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and dial toll free at

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(DASH) 2 DOT



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http://www.safercar.gov/questionnaire