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

2004 FEB 19 PM 2:35

FOR AGENCY USE ONLY 1367	
Date Received 23-DEC-2003	Repository. ☐
	Reference No. 10051973

OWNER INFORMATION (Type or Print)

Name			
Address		Daytime Telephone Number	E-mail Address
City SYRACUSE	State NY	Zip Code [redacted]	Evening Telephone Number

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 _____ Date / /

VEHICLE INFORMATION

17 digit Vehicle Identification Number Located at bottom of windshield on driver's side	Make	Model	Model Year
1FAFP53U3X[redacted]	FORD	TAURUS	1999

Date Purchased	Dealer's Name and Telephone Number			Engine: No: Cylinders	Fuel Type:
Original Owner ☐	Dealer's City	State	Zip Code		

Transmission Type	☐ Antilock Brakes ☐ Cruise Control	Powertrain	Vehicle Component Code: 103600 POWER TRAIN:AUTOMATIC TRANSMISSION:COOLING UNIT
			Multiple Failure: 1

FAILED COMPONENT(S)/PART(S) INFORMATION

Incident Date(s)	Failure Mileage	Failure Speed	
18-DEC-2003	112000	45	

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: DOTMAL9ABC036)	☐ 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 [illegible]
(Please describe in detail the Incident(s), Failure(s), Crash(es), and Injury(ies).)

Crash	Fire	Number of Persons Injured	Number of Deaths	Reported to Police
☐ Yes ☒ No	☒ Yes ☐ No			N

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(s) i.e., parts repaired or replaced (and if old part is available).

THE CONSUMER NOTICED SMOKE COMING FROM UNDER THE HOOD WHILE DRIVING AT 45 MPH. THE HOOD THEN BURST INTO FLAMES. THE FIRE BURNT THROUGH THE PAINT ON THE HOOD, MELTED THE FRONT TIRE, DASHBOARD AND OTHER FRONT END COMPONENTS. THE FIRE DEPARTMENT HASN'T IDENTIFIED THE CAUSE OF THE FIRE. THE CONSUMER FEELS IT MAY BE RELATED TO THE RECALL 98V288000 FOR THE TRANSMISSION OIL COOLER LINE. THE VIN NUMBER IS OUTSIDE THE REMEDY SCOPE. PLEASE PROVIDE ANY ADDITIONAL INFORMATION.
*NUM

[redacted] 1/10/04

Include, if available: Police/Fire Department Report, Photos, and Repair Invoice. ATTACH ADDITIONAL SHEETS IF NECESSARY.