



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 100145

Date Received

Repository **12**

14-DEC-2004

Reference No.
10103766

OWNER INFORMATION (Type or Print)

Name **[REDACTED]**
Address **[REDACTED]**
City **ROCKFORD** State **MI** Zip Code **[REDACTED]**

Daytime Telephone Number **[REDACTED]**

E-mail Address

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 authorized signature, please print the name or address to the vehicle manufacturer.
Signature of Owner **[REDACTED]** Date **1/04/05**

VEHICLE INFORMATION

17 digit Vehicle Identification Number Located at bottom of windshield on driver's side: **2FMDA58215E [REDACTED]** Make **FORD** Model **FREESTAR LIMITED** Model Year **2005**
Date Purchased **10-4-04** Dealer's Name and Telephone Number **IMALEY CITY FORD 810-724-5900** Engine: **4.2** Fuel Type: **Gas**
Original Owner ☒ Dealer's City **IMALEY CITY** State **MI** Zip Code **48444** No: Cylinders **6**
Transmission Type **AUTOMATIC** ☒ Antilock Brakes ☒ Cruise Control Powertrain
Vehicle Component Code **092200 FUEL SYSTEM, OTHER: DELIVERY: HOSES, LINES/PIPING, AND**
Multiple Failure: **1**

FAILED COMPONENT(S)/PART(S) INFORMATION

Incident Date(s) **11-DEC-2004** Failure Mileage **5200** Failure Speed **STOPPED AT TRAFFIC SIGNAL** **FUEL PUMP & RELATED LINES FAILED CAUSING MASSIVE FUEL LEAK, FROM TOP OF FUEL TANK.**

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: DOTM49ABC036) ☐ 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 **0** Number of Deaths **0** Reported to Police **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; i.e. parts repaired or replaced (and if old part is available).

CONSUMER STATES WHEN VEHICLE IS RUNNING EXCESSIVELY, AND THERE ARE EXCESSIVE FUEL LEAKS. CONSUMER IS CONCERNED THE VEHICLE WILL CATCH ON FIRE. *AK

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)

WHILE DRIVING THE VEHICLE WE STOPPED AT A TRAFFIC SIGNAL AND NOTICED THE SMELL OF FUEL, AFTER EXITING THE VEHICLE AND CHECKING FOR FUEL LEAKS, WE FOUND FUEL LEAKING FROM THE FUEL TANKS, ONTO THE EXHAUST PIPE AND THEN ONTO THE GROUND IN LARGE AMOUNTS.

VEHICLE WAS TOWED TO STEVE COURY FORD COTTONWOOD AZ 86326 WHERE REPAIRS WERE DONE.

ATTACH ADDITIONAL SHEET

U.S. Department
of Transportation

National Highway
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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
OWNER'S**

QUESTIONNAIRE

DOT AUTO SAFETY HOTLINE

**TO REPORT VEHICLE SAFETY DEFECTS
COMPLETE THIS FORM**

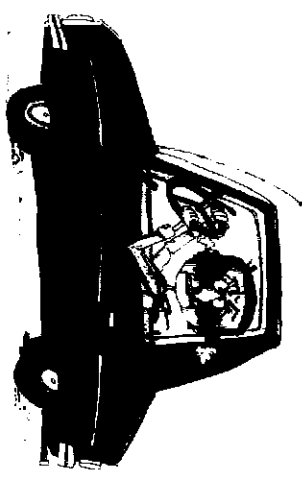
OR

DASH2DOT

and dial toll free at

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1-888-327-4236**

DOT Auto Safety Hotline
(DASH) 2 DOT



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THE ATTACHMENTS TO THIS
DOCUMENT HAVE BEEN REMOVED
TO PROTECT UNWARRANTED
INVASION OF PERSONAL PRIVACY
PURSUANT TO EXEMPTION 6 OF
THE FREEDOM OF INFORMATION
ACT (FOIA), 5 U.S.C. 552(b)(6).