



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 100249

Date Received: 2005 APR 25 AM
24-JAN-2005
Repository:
Reference No.: 10108744

OWNER INFORMATION (Type or Print)

Name: _____
Address: _____
City: NASHVILLE APO State: TN Zip Code: _____
Daytime Telephone Number: _____
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: 1FMEB15H4SL
Make: FORD Model: BRONCO Model Year: 1995
Date Purchased: 1997 Dealer's Name and Telephone Number: _____
Engine: No: Cylinders: 6 Fuel Type: Gas
Original Owner: Dealer's City: NASHVILLE State: TN Zip Code: _____
Transmission Type: AUTOMATIC Antilock Brakes Powertrain: 4 WHEEL DRIVE
Vehicle Component Code: I10000 ELECTRICAL SYSTEM
Multiple Failure: 1

FAILED COMPONENT(S)/PART(S) INFORMATION

Incident Date(s): 23-JAN-2005
Failure Mileage: 100,000
Failure Speed: _____

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: DOTM19ABC036): 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: 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).

THE VEHICLE WAS PARKED WHEN ALL OF A SUDDEN THE ENGINE COMPARTMENT CAUGHT ON FIRE. RESULTS SHOWED THAT THERE WAS AN ELECTRICAL SHORTAGE IN THE ENGINE. *1B

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.