



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 100222

Date Received

Repository ☐

31 JAN 2005

Reference No.
10109218

OWNER INFORMATION (Type or Print)

Name

Address

City

DUBLIN

State OH

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?
In the absence of an authorization, NHTSA WILL NOT provide your name or address to the vehicle manufacturer.
☐ YES ☒ NO

Signature of Owner

Date 1/1

VEHICLE INFORMATION

17 digit Vehicle Identification Number Located at bottom of windshield on driver's side
1FTNX2QF21

Make

FORD

Model

F250

Model Year

1992

Date Purchased

12-13-2001

Dealer's Name and Telephone Number

German Ford 614-889-7777

Engine

No. Cylinders

8

Fuel Type

Diesel

Original Owner

☒

Dealer's City

Dublin, Ohio

State

Oh.

Zip Code

43017

Transmission Type

Automatic

☒ Antilock Brakes

☒ Cruise Control

Powertrain

REAR WHEEL DRIVE

Vehicle Component Code

185000 VEHICLE SPEED CONTROL:CRUISE CONTROL

Multiple Failure: 1

FAILED COMPONENT(S)/PART(S) INFORMATION

Incident Date(s)

30-JAN-2004

Failure Mileage

68000

Failure Speed

Tire Make

Tire Model (Name or Number)

Tire Size (Example P215/85R15)

DOT No. (Example: DOTM18ABC036)

☐ 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), condition(s), and injury(ies).)

Crash

☐ Yes ☒ No

Fire

☒ Yes ☐ No

Number of Persons Injured

Number of Deaths

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).

CONSUMER PARKED THE VEHICLE, WENT INTO THE HOUSE, AND SMELLED SMOKE. BY THE TIME THE CONSUMER COULD RESPOND THE WINDOWS BLEW OUT BECAUSE OF THE FIRE. *AK

my 2001 F250 caught on fire under front hood by fire with my truck burnt completely up. The truck had been damaged and had been a shut off for about 45 miles before it caught fire.

Call our insurance company for any other information and pictures.

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.