



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
(1-888-327-4238)
INTERNET: www.nhtsa.dot.gov/hotline

FOR AGENCY USE ONLY 1372

Date Received

Repository ☐

2005 APR 29 AM 8:32
31-JAN-2005

Reference No.
10109282

OWNER INFORMATION (Type or Print)

Name [REDACTED]

Address [REDACTED]

City ROSENBERG

State TX

Zip Code [REDACTED]

Daytime Telephone Number [REDACTED]

E-mail Address [REDACTED]

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 [REDACTED]

Date 04/27/05

VEHICLE INFORMATION

17 digit Vehicle Identification Number Located at bottom of windshield on driver's side
1FTRW07 [REDACTED]

Make
FORD

Model
F150

Model Year
2001

Date Purchased

9-2002

Dealer's Name and Telephone Number

Dub Miller Ford 281-342-1813

Engine:

No. Cylinders

Fuel Type:

Original Owner

☐

Dealer's City

Rosenberg

State

TX

Zip Code

77471

Transmission Type

☐ Antilock Brakes

Powertrain

☒ Cruise Control

Vehicle Component Code

185000 VEHICLE SPEED CONTROL CRUISE CONTROL

Multiple Failure: 1

FAILED COMPONENT(S)/PART(S) INFORMATION

Incident Date(s)

16-SEP-2004

Failure Mileage

90,000

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: DOTM18ABC038)

☐ 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).

PARKED THE VEHICLE AT 6:00 PM AND ABOUT 10 MINUTES LATER THE TRUCK CAUGHT ON FIRE. THE FIRE WAS COMING FROM ENGINE COMPARTMENT. ON THE DRIVERS SIDE. THE VEHICLE HAS CRUISE CONTROL. THE CRUISE CONTROL WAS ONLY USED ONE TIME BEFORE THE FIRE LIKE 6 OR 7 MONTHS AGO. WILL E-MAIL PICTURES TO BRUCE YORK. VEHICLE WAS NOT INSURED.*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.



Consumer Affairs

PO Box 6248, MD 3NE-B
Dearborn, MI 48126 USA

Sent Via U.S. Mail

September 20, 2004

[REDACTED]
Rosenberg, TX [REDACTED]

RE: 2001 F-Series Truck
VIN: 1FTRW07V [REDACTED]

Dear [REDACTED]

This is in response to your phone call to our Ford Customer Relationship Center regarding your concerns.

We sincerely regret any inconveniences that you have experienced with your vehicle. Customer satisfaction is one of the primary objectives of Ford Motor Company. We commit substantial resources and diligent efforts in a sincere attempt to address the concerns of our customers. Our review indicates that there are no recalls or owner notification programs pertaining to the fire on your 2001 F-Series Truck. We regret that we are unable to be of assistance in this matter.

Thank you for contacting us.

Respectfully yours,


Lourdes Fonseca-Neuron
Consumer Affairs

Ford Motor Company

[Home](#)[Vehicles & Services](#)[Heritage](#)[Innovation](#)[Good Works](#)[Contact Us](#)[Vehicle Showroom](#)[Shop My Vehicle](#)[Vehicle History](#)[Owners](#)[Aftersales](#)[Finance](#)

Recalls Results

[Parts and Service](#)[My Vehicle](#)[Accessories & Merchandise](#)[Recall Information](#)

Be advised that this system tracks safety and emission recalls for which vehicles are subject to repair in the United States. For more information on Ford Motor Company recalls or concerns may be having with your vehicle, please contact your dealership directly.

Below you will find information regarding your affected vehicle.

Recalls Listed

Affected Vehicle

2001 Ford F-150

VIN

1FTRW07V

Recall

05S26

SPEED CONTROL DEACTIVATION SWITCH

Ford

Locate a Ford dealer in your area to schedule a repair appointment or to obtain detailed part information, depending on the nature of the recall.

Contact a Ford customer service representative with any other questions you may have.

What Should I Do Next?

- Locate your local dealership
- Advise the service department of the open recall on your vehicle
- Setup an appointment to have the recall completed

Be Advised

- This site is a reference tool for our customers
- Only recalls for the VIN provided are researched
- Only safety and emissions recalls launched since January 1, 1996 are reported
- Your local dealer will have more information on this or any other Ford Motor Company recall/vehicle campaign
- Completed recalls may appear here for a short period of time after your dealership completed repair

[Search](#) [Advanced Search](#) [Contact Us](#) [FAQ](#) [Privacy](#) [Site Map](#)

A GS611 TX MM DD YYYY 09 16 2004 02 04-0004078 000 FOLD * State * Incident Date * Station Incident Number * Exposure *		☐ Delete ☐ Change ☐ No Activity WFRS -1 Basic	
B Location* ☐ Check this box to indicate that the address for this incident is provided on the Wildland Fire Module in Section B "Alternative Location Specification". Use only for Wildland fires. ☒ Street address ☐ Intersection ☐ In front of ☐ Rear of ☐ Adjacent to ☐ Directions Rosenberg TX Apt./Suite/Room City State Zip Code Cross street or directions, as applicable			
C Incident Type * 131 Passenger vehicle fire Incident Type		E1 Date & Times Midnight is 0000 Check boxes if dates are the same as alarm ALARM always required Alarm * 09 16 2004 18:48:44 Arrival * 09 16 2004 18:52:02 Controlled ☐ LAST UNIT CLEARED, required except for wildland fires Last Unit Cleared 09 16 2004 20:14:49	
D Aid Given or Received* 1 ☐ Mutual aid received 2 ☐ Automatic aid recvd. 3 ☐ Mutual aid given 4 ☐ Automatic aid given 5 ☐ Other aid given N ☒ None Their FOLD Their State Their Incident Number		E2 Shift & Alarms Local Option C 02 4 Shift or Alarm District Platform E3 Special Studies Local Option Special Study ID# Special Study Value	
F Actions Taken * 11 Extinguish Primary Action Taken (1) 45 Remove hazard Additional Action Taken (2) 86 Investigate Additional Action Taken (3)		G1 Resources * ☒ Check this box and skip this section if an Apparatus or Personnel form is used. Apparatus Personnel Suppression 0001 0004 EMS Other ☐ Check box if resource counts include aid received resources.	
G2 Estimated Dollar Losses & Values LOSSES: Required for all fires if known. Optional for non fires. Property \$ 012,000 Contents \$ 000,000 PRE-INCIDENT VALUE: Optional Property \$ 014,000 Contents \$ 000,000			
Completed Modules ☒ Fire-2 ☐ Structure-3 ☐ Civil Fire Cas.-4 ☐ Fire Serv. Cas.-5 ☐ EMS-6 ☐ HazMat-7 ☐ Wildland Fire-8 ☒ Apparatus-9 ☒ Personnel-10 ☐ Arson-11		H1 Casualties None Deaths Injuries Fire Service Civilian H2 Detector Required for Confined Fires. 1 ☐ Detector alerted occupants 2 ☐ Detector did not alert them U ☐ Unknown	
H3 Hazardous Materials Release None 1 ☐ Natural Gas: also leak, no explosion or flammable vapors 2 ☐ Propane gas: all lb. tank (as in home gas grill) 3 ☐ Gasoline: vehicle fuel tank or portable container 4 ☐ Kerosene: fuel burning equipment or portable storage 5 ☐ Diesel fuel/fuel oil: vehicle fuel tank or portable 6 ☐ Household solvents: home/office spill, cleanup only 7 ☐ Motor oil: free engine or portable container 8 ☐ Paint: free paint cans totaling < 55 gallons 0 ☐ Other: Special Studies section completed or spill > 55 gal., please complete the Special Study		I Mixed Use Property MN ☐ Not Mixed 10 ☐ Assembly use 20 ☐ Education use 30 ☐ Medical use 40 ☐ Residential use 50 ☐ Row of stores 53 ☐ Enclosed mall 58 ☐ Bus. & Residential 59 ☐ Office use 60 ☐ Industrial use 63 ☐ Military use 65 ☐ Farm use 00 ☐ Other mixed use	
J Property Use* Structures 131 ☐ Church, place of worship 161 ☐ Restaurant or cafeteria 162 ☐ Bar/Tavern or nightclub 213 ☐ Elementary school or kindergarten 215 ☐ High school or junior high 241 ☐ College, adult education 311 ☐ Care facility for the aged 331 ☐ Hospital Outside 124 ☐ Playground or park 655 ☐ Crops or orchard 669 ☐ Forest (timberland) 807 ☐ Outdoor storage area 919 ☐ Dump or sanitary landfill 931 ☐ Open land or field		341 ☐ Clinic, clinic type infirmary 342 ☐ Doctor/dentist office 361 ☐ Prison or jail, not juvenile 419 ☐ 1-or 2-family dwelling 429 ☐ Multi-family dwelling 439 ☐ Rooming/boarded house 449 ☐ Commercial hotel or motel 459 ☐ Residential, board and care 464 ☐ Dormitory/barracks 519 ☐ Food and beverage sales 936 ☐ Vacant lot 938 ☐ Graded/care for plot of land 946 ☐ Lake, river, stream 951 ☐ Railroad right of way 960 ☐ Other street 961 ☐ Highway/divided highway 962 ☐ Residential street/driveway 539 ☐ Household goods, sales, repairs 579 ☐ Motor vehicle/boat sales/repair 571 ☐ Gas or service station 599 ☐ Business office 615 ☐ Electric generating plant 629 ☐ Laboratory/science lab 700 ☐ Manufacturing plant 819 ☐ Livestock/poultry storage (barn) 882 ☐ Non-residential parking garage 891 ☐ Warehouse 981 ☐ Construction site 984 ☐ Industrial plant yard Lookup and enter a Property Use code only if you have NOT checked a Property Use box. Property Use 965 Vehicle parking area	

K1 Person/Entity Involved

Local Option

Business name (if applicable)

Area Code

Phone Number

Mr., Ms., Mrs. First Name

MI

Last Name

Suffix

Number

Prefix

Street or Highway

Street Type

Suffix

Post Office Box

Apt./Suite/Room

City

State Zip Code

☐ More people involved? Check this box and attach Supplemental Forms (NFIRS-18) as necessary**K2 Owner**☐ Same as person involved? Then check this box and skip the rest of this section.

Business name (if applicable)

Area Code

Phone Number

Local Option

Mr., Ms., Mrs. First Name

MI

Last Name

Suffix

Number

Prefix

Street or Highway

Type

Suffix

Post Office Box

Apt./Suite/Room

Rosenberg

City

TX State Zip Code

L Remarks

Local Option

We were dispatched to a Vehicle Fire at [REDACTED] Upon our arrival we found a truck with fire coming from the engine compartment. We used a pre-connected hose line off E-2 with tank water and extinguished the fire. We were advised by the owner that she did not have insurance on her vehicle. We were also advised that there was another vehicle parked next to the one that was on fire that sustained some fire damage. Major fire damage was confined to the engine compartment area extending to the windshield and front driver's side tire. The owner stated that she had not had any engine problems with the vehicle and that it was running great. She also stated that she had just drove it back home from work within 10 minutes prior to the fire being reported. After the fire was extinguished a wrecker service, Mario's Wrecker, made location and removed the vehicle. Information was gathered and we returned in service.

Vehicle #1

2001 Ford F-150

LP 7RX-S92

VIN 1FTRW07W [REDACTED]

Vehicle #2

1989 Cadillac Sedan Ville

LP Z98-GCP

VIN 1G6CDS15 [REDACTED]

09/17/2004 07:00:51 Adam Carlin

L Authorization

CARLIN

Officer in charge ID

Carlin, Adam G

Signature

LT

Position or rank

Assignment

09

17

2004

Month Day Year

Check

Box if

same

as

Officer

in

charge.

CARLIN

Member making report ID

Carlin, Adam G

Signature

LT

Position or rank

Assignment

09

17

2004

Month Day Year