



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

31-JAN-2005

Repository ☐

Reference No.
10109296

OWNER INFORMATION (Type or Print)

Name
Address
City HOUSTON State TX Zip Code

Daytime Telephone Number

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 authorization, NHTSA will NOT provide your name or address to the vehicle manufacturer.

Signature of Owner Date 1/23/05

VEHICLE INFORMATION

17 digit Vehicle Identification Number (located at bottom of windshield on driver's side)		Make	Model	Model Year
1FMRU1784		FORD	EXPEDITION	1998
Date Purchased	Dealer's Name and Telephone Number		Engine: No. Cylinders	Fuel Type: Gas
Original Owner ☐	Dealer's City		State	Zip Code
Transmission Type AUTOMATIC	☒ Antilock Brakes ☒ Cruise Control	Powertrain UNKNOWN	Vehicle Component Code 185000 VEHICLE SPEED CONTROL: CRUISE CONTROL	
Multiple Failure: 1				

FAILED COMPONENT(S)/PART(S) INFORMATION

Incident Date(s) 21-AUG-2004	Failure Mileage 112000	Failure Speed	
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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
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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).

RECALL CAMPAIGN 05V017000 CONCERNING CRUISE CONTROL FIRE. VEHICLE WAS PARKED IN THE DRIVEWAY WHEN THE NEIGHBORS INFORMED CONSUMER THAT THE VEHICLE WAS ON FIRE. THE FIRE DEPARTMENT RESPONDED, AND THE VEHICLE WAS TOTALED. THIS VEHICLE WAS NOT INCLUDED IN THE RECALL DUE TO VIN. *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.