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 ☐
01-FEB-2005	Reference No. 10109412

OWNER INFORMATION (Type or Print)

Name	[redacted]		
Address	[redacted]	Daytime Telephone Number [redacted]	E-mail Address —
City HOUSTON	State TX	Zip Code [redacted]	Evening Telephone Number [redacted]

Do you authorize NHTSA to provide a copy of this report to the manufacturer of your vehicle? (X) YES ( ) NO
In the absence of a [redacted] me or address to the vehicle manufacturer.
Signature of Owne [redacted] Date 2/10/05

VEHICLE INFORMATION

17 digit Vehicle Identification Number Located at bottom of windshield on driver's side	Make	Model	Model Year
1FMRU17L8Yl[redacted]	FORD	EXPEDITION	2000

Date Purchased	Dealer's Name and Telephone Number			Engine:	Fuel Type:
2·16·02	Helfman Ford (281) 274-7224			No: Cylinders 8	Gas
Original Owner ☐	Dealer's City Houston (Stafford)	State TX	Zip Code 77477		

Transmission Type			Vehicle Component Code
AUTOMATIC	[X] Antilock Brakes [X] Cruise Control	Powertrain	110000 ELECTRICAL SYSTEM Multiple Failure: 1

FAILED COMPONENT(S)/PART(S) INFORMATION

Incident Date(s)	Failure Mileage	Failure Speed
14-JAN-2005	61898	— 0 —

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: DOTMAL9ABC036)	☐ 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	Fire	Number of Persons Injured	Number of Deaths	Reported to Police
☐ Yes [X] No	[X] Yes ☐ No	0	0	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).

WHILE PARKED A LOUD BANG WAS HEARD, AND THE OWNER NOTICED THAT THE VEHICLE CAUGHT ON FIRE. *AK

Ran 2 short errands on way home from work. Parked in my assigned space. Alarmed car + went into apartment. About 10-15 min. later, heard 1 loud "boom". Another "boom" - less intense about 10-15 seconds later - smelled smoke. Looked out window, entire front of vehicle Engulfed in flames. Called 911. Finished changing clothes, and by then my patio fence was also on fire. Vehicle + debris became "evidence" - to be examined by "State Farm" fire investigators, electrical engineer and rep. from Ford. #1 on 05 - Ford recalled this vehicle - recall #05S28.

Include, if available: Police/Fire Department Report, Photos, and Repair Invoice. ATTACH ADDITIONAL SHEETS IF NECESSARY

HOUSTON FIRE DEPARTMENT
INCIDENT REPORT
RUN NUMBER 0501140538

Incident No	Date/Time	Ref No.	Call Type	Alarm level	Alarm Methed
0501140538	01/14/2005 19:28:07		FFHVBA	1	9

District	Station	Shift	Call Box

Resources

	Apparatus	Personnel
Suppression	5	29
EMS	1	2
Other	0	0

Dates and Times

Dispatch	01/14/2005 19:28:28
Enroute	01/14/2005 19:29:04
On_Scene	01/14/2005 19:31:35
Clear	01/14/2005 20:53:55
Response	00:03:07
Duration	1 Hours 25:27 Minutes

Casualties

	Deaths	Injuries
Fire Service	0	0
Civilian	0	0

Location Type	Location			
STREET	3000	GREENRIDGE	DR	910

(Cross Street:)

HO TX Verified: Y

Map One	Map Two	Map Three	Parcel No.	Census Track	Census Block
491W					

EMS District	Fire District	X-Coordinate	Y-Coordinate	EMS Zone	Fire Zone
		05489809	29734790		

EXPOSURE No.	Incident Type	Primary Action	Additional Action	Additional Action	Aid Type	Aid Agency
0	VEHICLE	EXTINGUISH			NO AID	

Their Incident No.	Mixed Property Use	Property Use	Detector	Under Control Time	Special Study	Hazmat RIs
		PARKING AREA				

Agency	Officer In Charge	Name	Rank	Assignment
F	071545	CAMPBELL,JAMES	1023	SUPPRESS

Agency	Report By	Name	Rank	Assignment
F	105556	HAVLICE,EDWARD	1031	SUPPRESS

Property Total	Lost	Saved	Contents Total	Lost	Saved
	25000	-25000		5000	-5000

Exposure Location

Location Type	Location			
STREET	[redacted]	[redacted]	[redacted]	[redacted]

(Cross Street:)

HO TX

Map One	Map Two	Map Three	Parcel No.	Census Track	Census Block
491W					

EMS District	Fire District	X-Coordinate	Y-Coordinate	EMS Zone	Fire Zone
		05489809	29734790		

HOUSTON FIRE DEPARTMENT
INCIDENT REPORT
RUN NUMBER 0501140538

ALL FIRE

No. Resid Units	No. Buildings	Acres Burned	Origin Area	Heat Source	First Item Ignited	Spread
			ENG AREA	ARCING	UNDETERMINED	N

Material Type	Equip Involved	Ignition Cause	Ignation factor(1)	Ignation factor(2)
		UNINTENTIONAL	UNSPECIFIED	

On-Site Material(1)	Type	On-Site Material(2)	Type	On-Site Material(3)	Type

Fire Suppression Factor(1)	Fire Suppression Factor(2)	Fire Suppression Factor(3)

Equipment Brand	Model	Serial No.	Year	Power Source	Portability

Human Factor

Asleep	Possible impaired by alcohol or drugs	Unattended Person	Possible mentally disabled
N	N	N	N

Physicaliy Disabled	Multiple persons involved	Age was a factor	Estimate Age	Sex
N	N	N		

Local Use

Pre Fire Plan Available	Arson Report Attached	Police Report Attached
N	N	N

Coroner Rpeort Attached	Other Report Attached
N	N

Vehicles

Involvement	Role	Tag No	State	Make	Model
INV BURNED	FIRE		TX	FORD	

PARTIES INVOLVED (PEOPLE)

Type	Role	Name
NAME	OWNER	[redacted]

Narrative	By Agency	Unit	Dept ID	Date
	F			14-JAN-05

Narrative	By Agency	Unit	Dept ID	Date
	F	E028		14-JAN-05

Sent on vehicle fire. Upon arrival found Ford SUV Heavily involved under apartment car port. Fire had extended to apartment porch and was extinguished from the first floor to the second. E-28 used attack line to cover exposure then attack vehicle fire. Box pulled. Ladder 28 checked for extension above and to the sides of the fire area. Mrs. Robinson stated she had just gotten home, parked her car and been in her apartment #910 a few minutes. She heard a loud sound then saw her vehicle ablaze. Orgin area was electrical in the SUV behind the motor and in front of the fire wall. Passenger area and Engine area burned. Apartment Maintenance on scene with management.