



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

Form Approved O.M.B. No. 2127-0006

FOR AGENCY USE ONLY

Date Received

10119306

Od. or

rt. dt

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up. ltr

Reference No.

OWNER INFORMATION (Type or Print)

2005 APR 28 AM 7:49

Name

Street No.

Apt. No.

City

State

Zip

Daytime 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

PRODUCT INFORMATION

Vehicle Identification No. (VIN)
(17 Digits)
(Located at bottom of
windshield on driver's side)

1 F M R 4 1 5 6 8 4 L

Make

FORD

Model

EXPEDITION

Year

2000

Purchased Date

Dealer's Name

☐ New ☐ Used

Dealer's City

State

Zip Code

Engine Size
(CID/CC/L)

☐ Turbo

☐ Diesel

☐ Gas

☐ Fuel Injection

Manufacture Date
(on driver's door or pillar)

Transmission Type

☐ Manual

☐ Automatic

Restraint System

☐ Driverside Air Bag

☐ Motorbelt

☐ Passengerside Air Bag

☐ 2-Point Belt

☐ 3-Point Belt

Cruise Control

☐ Yes

☐ No

Drivetrain

☐ Front

☐ Rear

☐ 4-Wheel

Vehicle Type

☐ Car

☐ Sport Utility

☐ Van

☐ Truck

☐ Minivan

☐ Motorcycle

☐ Other

Body Style

☐ 2-Door

☐ 4-Door

☐ Stationwagon

☐ Pick Up Truck

☐ Other

FAILED COMPONENT(S)/PART(S) INFORMATION

Part Name(s)

SPEED CONTROL DEACTIVATION SWITCH

Location

☒ Left

☐ Front

☐ Right

☐ Rear

Failed Part(s)

☐ Original

☐ Replacement

Handicap Adaptive Equip

☐ Yes

☐ No

TO BE COMPLETED WHEN REPORTING A TIRE FAILURE

Tire Brand

Tire Name

Complete Tire Size

DOT No.

No. of Failures

Date(s) of Failure(s)

Mileage at Failure(s)

Vehicle Speed at Failure(s)

Failed Part(s)
Available?

☐ Yes

☐ No

NHTSA Previously
Contacted?

☐ Yes

☐ No

APPLICABLE INCIDENT INFORMATION

(Please describe in detail the Incident(s), Failure(s), Crash(es), and Injury(ies). Attach photos if available.)

Crash

☐ Yes ☐ No

Fire

☒ Yes ☐ No

Number of Persons Injured

Number of Fatalities

Reported to Manufacturer

☒ Yes ☐ No

Narrative Description of Incident(s), Failure(s), Crash(es), and Injury(ies).

Vehicle was parked and unoccupied caught fire
damaged 2 other vehicles next to it.

Date of loss 4/14/04 Result ?

Continue on back

The Privacy Act of 1974 - Public Law 93-579 This information is requested pursuant to 49 U.S.C. Chapter 301. You are under no obligation to respond to this questionnaire. Your response may be used to assist NHTSA in determining whether a manufacturer should take appropriate action to correct a safety defect. If NHTSA proceeds with administration enforcement or litigation against a manufacturer, your response, or a statistical summary thereof, may be used in support of the agency's action.

Mail postage free or fax to 202-366-7882