53-6422-319

Form Approved: O.M.B. No. 2127-0008

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

Date Received: 2005 JUN 22 AM 8:40

Od_or ___ ___
rt_dt ___ ___
od_rt ___ ___
up_ltr ___ ___

Reference No.: 10126879

OWNER INFORMATION (Type or Print)

Name: [redacted]

Street No.: [redacted]

City: HOUSTON | State: TX | Zip Code: [redacted]

Daytime Telephone Number: [redacted]

Do you authorize NHTSA to provide a copy of this report to the manufacturer of your vehicle? ☒ ***YES*** ☐ ***NO***
In the absence of a [redacted] ***or address to the vehicle manufacturer.***

Signature of Owner [redacted] Date ___/___/___

PRODUCT INFORMATION

Vehicle Identification No. (VIN.) (17 Digits) *(Located at bottom of windshield on driver's side)*: 2FTRX07L7YC[redacted]

Make: FORD | Model: F-150 | Year: 2000

Purchased Date: /2000 ☐ New ☐ Used

Dealer's Name: BAY AREA FORD

Dealer's City: HOUSTON | State: | Zip Code: 77062

Engine Size (CID/CC/L): 5.4 | No. Cylinders: 8

☐ Turbo ☐ Diesel ☒ Gas ☐ Fuel Injection

Manufacture Date (on driver's door or pillar)	Transmission Type	Restraint System	Cruise Control	Drivetrain	Vehicle Type	Body Style
	☐ Manual ☒ Automatic	☒ Driverside Air Bag ☒ Passengerside Air Bag ☐ 3-Point Belt ☐ Motorbelt ☐ 2-Point Belt	☒ Yes ☐ No	☐ Front ☒ Rear ☐ 4-Wheel	☐ Car ☐ Sport Utility ☐ Van ☒ Truck ☐ Minivan ☐ Motorcycle ☐ Other	☐ 2-Door ☒ 4-Door ☐ Stationwagon ☐ Pick Up Truck ☐ Other

FAILED COMPONENT(S)/PART(S) INFORMATION

Part Name(s): CRUISE CONTROL DEACTIVATION Switch

Location: ☐ Left ☐ Right ☒ Front ☐ 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

No. of Failures

Date(s) of Failure(s): 8-31-2004
Mileage at Failure(s): 60,000
Vehicle Speed at Failure(s): 0

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	Fire	Number of Persons Injured	Number of Fatalities	Reported to Manufacturer
☐ Yes ☒ No	☒ Yes ☐ No	0	0	☒ Yes ☐ No

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

THE TRUCK WAS PARKED AT 7:00 AM AND CAUGHT FIRE AT 2:00 PM - TOTAL LOSS

ALSO TOTALED CAR NEXT TO IT AND DAMAGED 3 OTHERS

FORD TOLD ME THEY COULD NOT GIVE ME ANY ASSISTANCE BECAUSE THERE WAS NOT A RECALL FOR UNDER HOOD FIRES (AT THAT TIME)

Continue on back.

Mail postage free or fax to 202-366-7882