



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 100148

Date Received

26-JUL-2005

Repository

Reference No.

10130076

OWNER INFORMATION (Type or Print)

Name [REDACTED]
Address [REDACTED]
City STARKVILLE State MS Zip Code [REDACTED]

Daytime Telephone Number [REDACTED]

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 7/1/05

VEHICLE INFORMATION

17 digit Vehicle Identification Number Located at bottom of windshield on driver's side
1FALP6533 [REDACTED] Make FORD Model CONTOUR Model Year 1985
Date Purchased 15-JUN-00 Dealer's Name and Telephone Number WESLEY FORD MOTORS 701-852-1354 Engine: No. Cylinders 4 Fuel Type: Gas
Original Owner Dealer's City MINOT State MD Zip Code 58707
Transmission Type Antilock Brakes Powertrain FRONT WHEEL DRIVE Vehicle Component Code 114000 ELECTRICAL SYSTEM:WIRING
AUTOMATIC Cruise Control Multiple Failure: 1

FAILED COMPONENT(S)/PART(S) INFORMATION

Incident Date(s) 26-JUL-2005 Failure Message 101000 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: DOTM15A8C036) 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 by detail the incident(s), failure(s), crash(es), and injury(ies).)

Crash Yes No Fire Yes No
Number of Persons Injured _____ Number of Deaths _____ Reported to Police N

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).

DT: CONSUMER FELT VEHICLE HAD BAD WIRING HARNESS. THE ENGINE LIGHT CAME ON AND OFF. THERE WERE NO AIR CONDITIONER/ HEATER/ COMPRESSOR OR FAN. TOOK VEHICLE TO AN A MECHANIC, IT WAS THERE THAT MECHANIC DETERMINED THAT THE WIRING HARNESS WAS FAULTY, AND HAD A POTENTIAL FOR CATCHING ON FIRE. NO REPAIRS WERE MADE. CONSUMER CONTACTED DEALERSHIP AND FORD MANUFACTURER ABOUT THIS PROBLEM. CONSUMER WAS ADVISED OF AN EXTENDED WARRANTY THROUGH CUSTOMER RELATIONS FOR 10 YEARS OR 100,000 MILES. CONSUMER DID NOT APPLY FOR EXTENDED WARRANTY BECAUSE VEHICLE WAS OVER 100,000 MILES, AND DEALER NEVER MADE CONSUMER AWARE OF THIS IN THE PAST. NO REPAIRS WERE MADE.

ATTACH ADDITIONAL SHEETS IF NECESSARY

Include, if available: Police/Fire Department Report, Photos, and Repair Invoice.

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.