



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

Repository ☐

2006 MAY 14 11:11
22 MAR 2006

Reference No.
10153421

OWNER INFORMATION (Type or Print)

Name

Address

City

SAN ANTONIO

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 1/1

VEHICLE INFORMATION

17 digit Vehicle Identification Number located at bottom of windshield on driver's side

1FMEU1766V

Make

FORD

Model

EXPLORER

Model Year

1997

Date Purchased

Dealer's Name and Telephone Number

Engine:

No. Cylinders 8

Fuel Type:

Gas

Original Owner

Dealer's City

State

Zip Code

Transmission Type

☐ Antilock Brakes

☒ Cruise Control

Powertrain

4 WHEEL DRIVE

Vehicle Component Code

185000 VEHICLE SPEED CONTROL/CRUISE CONTROL

Multiple Failure: 1

FAILED COMPONENT(S)/PART(S) INFORMATION

Incident Date(s)
11-NOV-2005

Failure Mileage

11300

Failure Speed

113.000

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: DOTNALSABC03)

☐ 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

Number of Deaths

Reported to Police

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).

ON NOVEMBER 11, 2005 DRIVING MY FORD EXPLORER ON HIGHWAY 410 AND JONES MALTBERGER IN THE CITY OF SAN ANTONIO TEXAS. MY CAR WAS ON FIRE IN THE FRONT HOOD. I BELIEVE IT GOT CAUGHT ON FIRE BECAUSE IT HAS A DEFECTIVE SPEED CONTROL CAUSING ON THE VEHICLE CONTROL DEACTIVATION SWITCH BECAUSE IT OVERHEATED AND SMOKE AND BURNING UNDER THE HOOD HAPPENED. I CONTACTED FORD AND THEY DONT WANT TO BE RESPONSIBLE TO MAKE REPAIRS. FORD SENT AN INSPECTOR ON JANUARY 4, 2006. MR. MARCEL MICLEA WAS IN CHARGE OF THE CASE FROM CONSUMER AFFAIRS. HE SENT A LETTER AND CONCERN WAS REVIEW AND WAS NOT ABLE TO VERIFY MANUFACTURER DEFECT AND COULD NOT OFFER ASSISTANCE AT THIS TIME. *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.

Please: Reference # 10153421
My SUV is an EXPEDITION.
Failure Mileage: 113,000