



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 ☐

Reference No.
10228326

2008 JUN -9 AM 7:47
20 MAY 2008

OWNER INFORMATION (Type or Print)

Name
Address
City BLACK SHEER State GA 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 ____/____/____

VEHICLE INFORMATION

17 digit Vehicle Identification Number Located at bottom of windshield on driver's side
2FALP73W0RX

Make
FORD

Model
CROWN VICTORIA

Model Year
1994

Date Purchased
08/20/97

Dealer's Name and Telephone Number
GUY'S AUTOMOTIVE 9122854557

Engine:
No: Cylinders
8

Fuel Type:
gasoline

Original Owner
☐

Dealer's City
WAYCROSS

State
GA Zip Code
31503

Transmission Type ☒ Antilock Brakes
auto ☒ Cruise Control

Powertrain

Vehicle Component Code
180000 VEHICLE SPEED CONTROL

Multiple Failure:

FAILED COMPONENT(S)/PART(S) INFORMATION

Incident Date(s)
10-APR-2002

Failure Mileage

Failure Speed
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: DOTM19ABC036)

☐ 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 ☒ No

☒ 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).

TL*THE CONTACT OWNED A 1994 FORD CROWN VICTORIA. WHILE PARKED, THE CONTACT'S VEHICLE CAUGHT FIRE UNDERNEATH THE HOOD. THE VEHICLE WAS DESTROYED. TWO VEHICLES PARKED NEAR THE BURNING VEHICLE RECEIVED PAINT DAMAGE, AND WERE REPAIRED BY THE CONTACT'S INSURANCE COMPANY. SHE HAS REPORTS FROM HER INSURANCE COMPANY REGARDING THE FIRE. SHE FILED A COMPLAINT WITH FORD AND THEY SENT A LETTER IN RESPONSE STATING THAT THERE WERE NO OPEN RECALLS ON HER VEHICLE. THEY FURTHER STATED THAT IF A RECALL SHOULD BECOME AVAILABLE, SHE WOULD BE NOTIFIED. IN MARCH OF 2008, THE CONTACT RECEIVED A SAFETY RECALL NOTICE FOR NHTSA CAMPAIGN ID NUMBER 07V336000 (VEHICLE SPEED CONTROL). A POLICE REPORT WAS FILED. THE CONTACT HAS PICTURES. THE CURRENT AND FAILURE MILEAGES WERE UNAVAILABLE.

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 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.



Ford Motor Company
Ford Customer Service Division
P.O. Box 1904
Dearborn, Michigan 48121



F0081254

0233



March 2008

BLACKSHEAR, GA

1994 Crown Victoria

Vehicle ID #: 2FALP73W0RX

05S28

******* IMPORTANT REMINDER *******

Service parts are now available to perform the necessary repairs to your vehicle.

This notice is sent to you in accordance with the requirements of the National Traffic and Motor Vehicle Safety Act.

Ford Motor Company has previously sent you a letter indicating that a defect which relates to motor vehicle safety exists in your speed control equipped vehicle. This condition may result in a vehicle fire, even if the vehicle is parked even if you have never used your speed control. We apologize for this situation and for our previous lack of repair parts and want to assure you that, with your assistance, we will correct this condition. Our commitment, together with Ford and Lincoln Mercury dealers, is to provide you with the highest level of service and support.

What is the issue?

Ford cannot be confident that over many years in service, the type of Speed Control Deactivation Switch (SCDS) installed on your vehicle will not leak, posing the risk of an underhood fire. This condition may occur either when the vehicle is parked or when it is being operated, even if the speed control is not in use.

What will Ford and your dealer do?

Ford Motor Company has authorized your dealer to perform the repairs under this program free of charge (parts and labor). If you had the Interim Repair (Speed Control System disconnect) performed, the final repair will restore operation of the speed control system. If your dealer has recently completed the final repair on your vehicle for this recall, please disregard this letter.

How long will it take?

Your dealer may be able to perform this repair while you wait; however, due to scheduling requirements, your dealer may need your vehicle for a longer period of time.

What are we asking you to do?

We urge you to contact your dealer as soon as possible to schedule an appointment to have this service performed.

Provide the dealer with the Vehicle Identification Number (VIN) of your vehicle. The VIN is printed near your name at the beginning of this letter.

Until you have the recall service performed, park your vehicle away from structures to prevent a potential underhood fire from spreading.

The vehicle owner is responsible for having this service action performed. Ford Motor Company reserves the right to deny coverage for any vehicle damage that may result from failure to have this recall performed on a timely basis. Therefore, please have this recall performed as soon as possible.

RETAIL OWNERS: If you do not already have a servicing dealer, you can access <http://www.genuineservice.com> for dealer addresses, maps, and driving instructions.

FLEET OWNERS: If you do not already have a servicing dealer, you may access our Dealer Locator on <https://www.fleet.ford.com> for dealer addresses, maps, and driving instructions.

Please note: Federal law requires that any vehicle lessor receiving this recall notice must forward a copy of this notice to the lessee within ten days.

What if you no longer own this vehicle?

If you no longer own this vehicle, and have an address for the current owner, please forward this letter to the new owner.

You received this notice because government regulations require that notification be sent to the last known owner of record. Our records are based primarily on state registration and title data, which indicate that you are the current owner.

Can we assist you further?

If you have difficulties getting your vehicle repaired promptly and without charge, please contact your dealership's Service Manager for assistance.

RETAIL OWNERS: If you still have concerns, please contact the Ford Motor Company Customer Relationship Center at 1-888-222-2751 and one of our representatives will be happy to assist you. For the hearing impaired call 1-800-232-5952 (TDD). Office Hours are Monday through Friday: 8AM – 5PM (Your Local Time).

If you wish to contact us through the Internet, our address is:
www.ownerconnection.com

FLEET OWNERS: If you still have concerns, please contact the Fleet Customer Information Center at 1-800-34-FLEET, Option #3 and one of our representatives will be happy to assist you. Representatives are available 8:30AM to 5:00PM Monday through Friday (Eastern Time Zone).

Or you may contact us through the internet at www.fleet.ford.com.

If you are still having difficulty getting your vehicle repaired in a reasonable time or without charge, you may write the Administrator, National Highway Traffic Safety Administration, 1200 New Jersey Avenue, SE., Washington, D. C. 20590 or call the toll free Vehicle Safety Hotline at 1-888-327-4236 (TTY: 1-800-424-9153) or go to <http://www.safercar.gov>.

Thank you for your attention to this important matter.

Ford Customer Service Division

Confirmation #

10228326

Ford

1-800-392-3673

Ford Motor Company

Consumer Affairs

Sent via U.S. Mail

October 4, 2002

[REDACTED]
[REDACTED]
Blackshear, GA [REDACTED]

RE: 1994 Crown Victoria
VIN: 2FALP73W0RX [REDACTED]

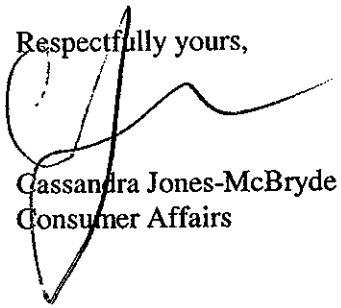
Dear [REDACTED]

Thank you for contacting Ford Motor Company regarding your vehicle.

Our review indicates that there are no open recalls on your 1994 Crown Victoria. Recalls and Owner Notification Programs (ONP) are Vehicle Identification Number (VIN) and model year specific. Should there be any future recalls on your vehicle, you will be notified via first class mail.

Thank you for the opportunity to review this concern.

Respectfully yours,


Cassandra Jones-McBryde
Consumer Affairs



INCIDENT REPORT

Waycross Fire Department

NFIRS-1

[] DELETE
[] CHANGE

A	FDID 14802	INCIDENT NO 02-041156	EXP NO 00	MO 04	DAY 10	YR 02	DAY OF WEEK Wednesday 4	ALARM TIME 14:18:00	ARRIVAL TIME 14:22:00	IN SERVICE 15:39:00		
B	TYPE OF SITUATION FOUND Vehicle Fire						TYPE OF ACTION TAKEN 13 Extinguishment				MUTUAL AID [] Recd [] Given	
C	FIXED PROPERTY USE Storage Property						IGNITION FACTOR 800 Undetermined					
D	CORRECT ADDRESS Waycross, GA						CO. WA	TWN	ZIP CODE	CENSUS TRACT		
E	OCCUPANT NAME						TELEPHONE		ROOM/APT NO			
F	OWNER NAME						ADDRESS Waycross, GA		TELEPHONE			
G	METHOD OF ALARM FROM PUBLIC Telephone Tie Line						TYPE OF ALARM 7		DISTRICT 2-C	SHIFT B	STATION 2	NO. ALARMS 1
H	911 USED Ware County PSCC		PERSONNEL RESPONDED 1 004		ENGINES RESPONDED 001		AERIAL APPARATUS 000		OTHER VEHICLES 001			

I	NUMBER OF INJURIES FIRE SERVICE 000	OTHER 000	NUMBER OF FATALITIES FIRE SERVICE 000	OTHER 000
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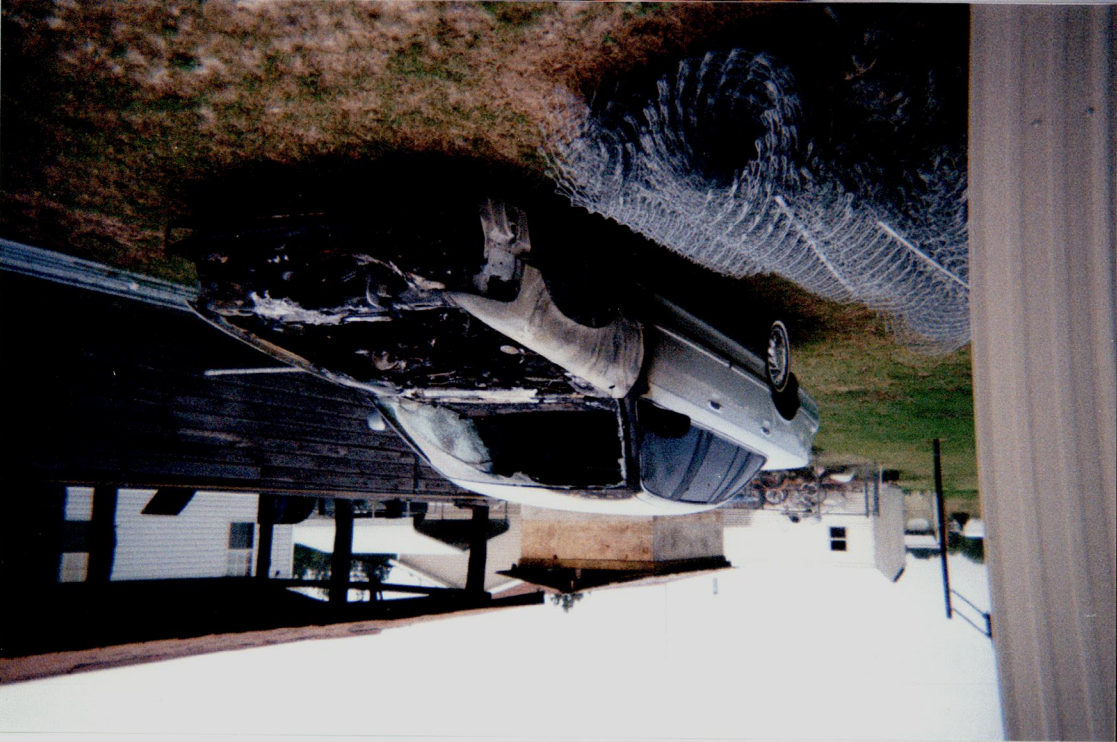
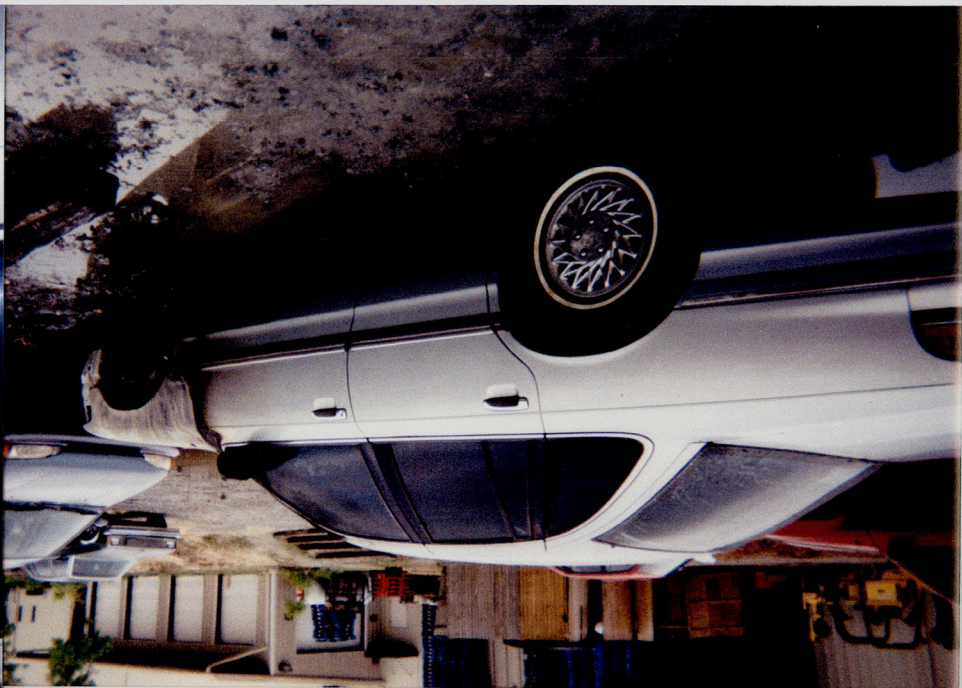
J	COMPLEX Warehouse, Storage Complex	80	MOBILE PROPERTY TYPE Automobile	11
K	AREA OF FIRE ORIGIN Engine Area, Running Gear		EQUIPMENT INVOLVED IN IGNITION Vehicle	
L	FORM OF HEAT OF IGNITION Unspecified Short Circuit	24	TYPE OF MATERIAL IGNITED Polyurethane	41
M	METHOD OF EXTINGUISHMENT Preconnect	6	LEVEL OF FIRE ORIGIN Grade to +9'	1
			FORM OF MATERIAL IGNITED Electrical Wire	61

N	NUMBER OF STORIES	CONSTRUCTION TYPE
O	EXTENT OF FLAME DAMAGE	EXTENT OF SMOKE DAMAGE
P	DETECTOR PERFORMANCE	SPRINKLER PERFORMANCE
Q	IF SMOKE SPREAD BEYOND ROOM OF ORIGIN	TYPE OF MATERIAL GENERATING MOST SMOKE
R		AVENUE OF SMOKE TRAVEL
		FORM OF MATERIAL GENERATING MOST SMOKE

IF MOBILE PROPERTY	YEAR 94	MAKE Ford	MODEL Crown Victoria	SERIAL NO. 2FALP7	LICENSE NO.
IF EQUIPMENT INVOLVED IN IGNITION	YEAR 94	MAKE Ford	MODEL Crown Victoria	SERIAL NO. 2FALP73WORX	

[] CHECK IF COMMENTS

OFFICER IN CHARGE (NAME, POSITION, ASSIGNMENT) Ray, Robert L/Lieutenant	DATE 04/10/2002
MEMBER MAKING REPORT (IF DIFFERENT FROM ABOVE) Ray, Robert L/Lieutenant	DATE 04/10/2002





MARKET CLAIM OFFICE
P.O. BOX 7877
MACON GA 31209

PHONE NUMBER: 800-729-0130
OFFICE HOURS: MONDAY-FRIDAY 8:00-5:30

May 14, 2002

[REDACTED]
[REDACTED]
BLACKSHEAR GA [REDACTED]

Allstate Insurance Company
Claim Number: [REDACTED] HPA
Loss Date: April 10, 2002
Our Insured: [REDACTED]
Location: INSD WK: STEWART CANDY 400..., BLACKSHEAR

Please find enclosed the check copies for the above incident. We have settled with both parties involved and closed our file.

Sincerely,

Patrice Claxton

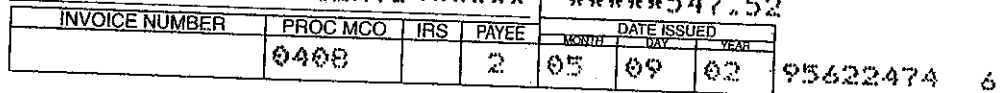
PATRICE CLAXTON
Allstate Insurance Company

SM00/0/01/1

Copy to FILE

POLICY NUMBER	CLAIM NUMBER	
[REDACTED]	[REDACTED]	
SSN/TIN	DESK LOC	EMPLOYEE I.D.
	HFA	

\$ 547.52

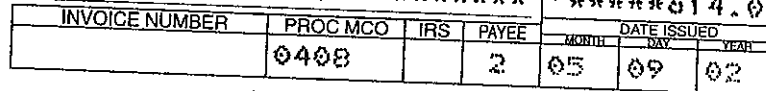


COMPANY NAME
ALLSTATE INSURANCE COMPANY

VOID IF NOT PRESENTED WITHIN THREE HUNDRED, SIXTY-FIVE DAYS OF THE DATE OF ISSUE.

POLICY NUMBER		CLAIM NUMBER	
[REDACTED]		[REDACTED]	
SSN/TIN		DESK LOC	EMPLOYEE I.D.
		HFA	G.BYT

\$ ##### 014.00

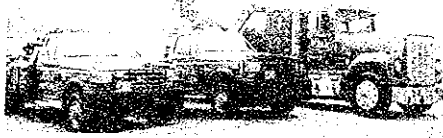


COMPANY NAME
ALLSTATE INSURANCE COMPANY

VOID IF NOT PRESENTED WITHIN THREE HUNDRED, SIXTY-FIVE DAYS OF THE DATE OF ISSUE.

MIKE'S BODY SHOP, INC.

"SPECIALIZING IN COLLISION REPAIR"



TOWING REPORT

1611 State Street • Waycross, GA 31501
Day: 283-3587 • Night: 285-5451 • Beeper: 285-6679

Name		Date																
Address		City	State															
Home Phone	Insurance Company	Insurance Phone																
Business Phone	Year	Make	Model															
License	Speedometer	VIN	Color															
		1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17
CALL NO.			TOWED FROM															
CALL TIME			Stewart & Candy Co															
TYPE OF CALL			TOWED TO															
SERVICE TIME			Christie Cude															
EXTRA MAN																		
MILEAGE FINISH																		
MILEAGE START																		
MILEAGE TOTAL																		
REMARKS			☐ START ☐ WRECK ☐ BATTERY ☒ TOW ☐ FLAT TIRE ☐ CARRIER ☐ GAS ☐ FLAT BED ☐ LOCKOUT ☐ AAA															
			MILEAGE CHARGE TOWING CHARGE ROAD SERVICE CHARGE STORAGE CHARGE															
MECHANIC'S SIGNATURE			SUB TOTAL															
X <i>[Signature]</i>			TAX															
AUTHORIZED SIGNATURE			TOTAL															
X			17153 3800															