



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

2008 JUL -3 AM 10:02

Repository ☐

12-JUN-2008

Reference No.
10230836

OWNER INFORMATION (Type or Print)

Name

Address

City

RANDLEMAN

State

NC

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

1FTPW14525F

Make

FORD

Model

F-150

Model Year

2005

Date Purchased

Dealer's Name and Telephone Number

Engine:

No: Cylinders

Fuel Type:

Original Owner

☐

Dealer's City

State

Zip Code

Transmission Type

☐ Antilock Brakes

Powertrain

Vehicle Component Code

114000 ELECTRICAL SYSTEM: WIRING

☐ Cruise Control

Multiple Failure:

FAILED COMPONENT(S)/PART(S) INFORMATION

Incident Date(s)

28-MAR-2008

Failure Mileage

11200

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

☐ Yes ☒ No

Fire

☒ Yes ☐ No

Number of Persons Injured

0

Number of Deaths

0

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).

TL: THE CONTACT OWNS A 2005 FORD F-150 SUPER CREW 4X4. THE VEHICLE CAUGHT FIRE WHILE PARKED. THE FIRE DEPARTMENT EXTINGUISHED THE FIRE AND FILED A REPORT. THE VEHICLE WAS DESTROYED. THE FIRE DEPARTMENT STATED THAT THE FIRE ORIGINATED FROM THE WIRING HARNESS. THE CONTACT HAS PICTURES. THE CURRENT AND FAILURE MILEAGES WERE 11,200.

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.

FDID

State

MM

DD

YY

Station

Incident Number

Exposure

0760

NC

03

28

2008

01

3276

☐ Delete
☐ Change
☐ No Activity

NFIRS-1 Basic

Location Type

☐ Street address
☐ Intersection
☒ In front of
☐ Rear of
☐ Adjacent to
☐ Directions
☐ US National Grid

☐ Check this box to indicate that the address for this incident is provided on the Wildland Fire Module in Section B, "Alternative Location Specification." Use only for wildland fires.

Census Tract

145

Worth

ST

Ashboro

NC

27203

Number/Milepost

Prefix

Street or Highway

Street Type

Suffix

Apt./Suite/Room

City

State

ZIP Code

Cross Street, Directions or National Grid, as applicable

Incident Type

1311 Vehicle Fire

Incident Type

Aid Given or Received

☐ None

1

2

3

4

5

Mutual aid received

Auto. aid received

Mutual aid given

Auto. aid given

Other aid given

Their FDID

Their State

Their Incident Number

Dates and Times

Month

Day

Year

Hour

Min

Midnight is 0000

Alarm

03 28 2008 11 30

☐ Arrival
☐ Controlled
☐ Last Unit Cleared

ARRIVAL required, unless canceled or did not arrive

CONTROLLED optional, except for wildland fires

LAST UNIT CLEARED, required except for wildland fires

Shifts and Alarms

Local Option

☒ Shift or Platoon
☐ Alarms
☐ District

Special Studies

Local Option

Special Study ID#

Special Study Value

Actions Taken

11 Extinguish

86 Investigate

Primary Action Taken (1)

Additional Action Taken (2)

Additional Action Taken (3)

Resources

☐ Check this box and skip this block if an Apparatus or Personnel Module is used.

Apparatus

Personnel

Suppression

EMS

Other

01

04

01

02

☐ Check box if resource counts include aid received resources.

Estimated Dollar Losses and Values

LOSSES:

Required for all fires if known. Optional for non-fires.

None

Property

Contents

PRE-INCIDENT VALUE: Optional

Property

Contents

Completed Modules

☒ Fire-2
☐ Structure Fire-3
☐ Civilian Fire Cas.-4
☐ Fire Service Cas.-5
☐ EMS-6
☐ HazMat-7
☐ Wildland Fire-8
☐ Apparatus-9
☐ Personnel-10
☐ Arson-11

H1 Casualties

☒ None

Deaths

Injuries

Fire Service

Civilian

H2 Detector

Required for confined fires.

1

2

U

Detector alerted occupants

Detector did not alert them

Unknown

H3 Hazardous Materials Release

☒ None

1

2

3

4

5

6

7

8

0

Natural gas: slow leak, no evacuation or HazMat actions

Propane gas: <21-lb tank (as in home BBQ grill)

Gasoline: vehicle fuel tank or portable container

Kerosene: fuel burning equipment or portable storage

Diesel fuel/fuel oil: vehicle fuel tank or portable storage

Household solvents: home/office spill, cleanup only

Motor oil: from engine or portable container

Paint: from paint cans totaling <55 gallons

Other: special HazMat actions required or spill > 55 gal (Please complete the HazMat form.)

Mixed Use Property

☒ Not mixed

10

20

33

40

51

53

58

59

60

63

65

00

Assembly use

Education use

Medical use

Residential use

Row of stores

Enclosed mall

Business & residential

Office use

Industrial use

Military use

Farm use

Other mixed use

Property Use

☐ None

131

161

162

213

215

241

311

331

Church, place of worship

Restaurant or cafeteria

Bar/tavern or nightclub

Elementary school, kindergarten

High school, junior high

College, adult education

Nursing home

Hospital

341

342

361

419

429

439

449

459

464

519

Clinic, clinic-type infirmary

Doctor/dentist office

Prison or jail, not juvenile

1- or 2-family dwelling

Multifamily dwelling

Rooming/boarded house

Commercial hotel or motel

Residential, board and care

Dormitory/barracks

Food and beverage sales

655

669

807

919

931

Crops or orchard

Forest (timberland)

Outdoor storage area

Dump or sanitary landfill

Open land or field

936

938

946

951

960

961

962

Vacant lot

Graded/cared for plot of land

Lake, river, stream

Railroad right-of-way

Other street

Highway/divided highway

Residential street/driveway

539

571

579

599

615

629

700

819

882

891

Household goods, sales, repairs

Gas or service station

Motor vehicle/boat sales/repairs

Business office

Electric-generating plant

Laboratory/science laboratory

Manufacturing plant

Livestock/poultry storage (barn)

Non-residential parking garage

Warehouse

981

984

Construction site

Industrial plant yard

Look up and enter a Property Use code and description only if you have NOT checked a Property Use box.

Property Use

Code

Property Use Description

NFIRS-1 Revision 01/01/05

K1 Person/Entity Involved

Local Option

Business Name (if applicable)

Area Code

Phone Number

☐ Check this box if same address as Incident Location (Section B). Then skip the three duplicate address lines.

Mr., Ms., Mrs.

MI Last Name

Suffix

Number

Prefix

Street or Highway

Street Type

Suffix

Post Office Box

Apt./Suite/Room

City

State

ZIP Code

☐ More people involved? Check this box and attach Supplemental Forms (NFIRS-1S) as necessary.

K2 Owner

Local Option

☐ Same as person involved? Then check this box and skip the rest of this block.

Business Name (if applicable)

Area Code

Phone Number

☐ Check this box if same address as Incident Location (Section B). Then skip the three duplicate address lines.

Mr., Ms., Mrs.

First Name

MI

Last Name

Suffix

Number

Prefix

Street or Highway

Street Type

Suffix

Post Office Box

Apt./Suite/Room

City

State

ZIP Code

L

Remarks:

Local Option

Fire Module Required?

Check the box that applies and then complete the Fire Module based on Incident Type, as follows:

☐ Buildings 111	Complete Fire & Structure Modules
☐ Special structure 112	Complete Fire Module & Section I, Structure Module
☐ Confined 113-118	Basic Module Only
☐ Mobile property 120-123	Complete Fire Module
☐ Vehicle 130-138	Complete Fire Module
☐ Vegetation 140-143	Complete Fire or Wildland Module
☐ Outside rubbish fire 150-155	Basic Module Only
☐ Special outside fire 160	Complete Fire or Wildland Module
☐ Special outside fire 161-163	Complete Fire Module
☐ Crop fire 170-173	Complete Fire or Wildland Module

ITEMS WITH A ★ MUST ALWAYS BE COMPLETED.

☐ More remarks? Check this box and attach Supplemental Forms (NFIRS-1S) as necessary.

M Authorization

Check box if same as Officer in charge.

Officer in charge ID

Sig

Position or rank

Assignment

Month

Day

Year

Member making report ID

Signature

Position or rank

Assignment

Month

Day

Year

A FDID 076011 State NC Incident Date 03/28/2008 Station 01 Incident Number Exposure ☐ Delete ☐ Change **NFIRS-2 Fire**

B Property Details

B1 ☒ Not Residential
Estimated number of residential living units in building of origin whether or not all units became involved

B2 ☒ Buildings not involved
Number of buildings involved

B3 ☒ None ☐ Less than one acre
Acres burned (outside fires)

C On-Site Materials or Products ☒ None
Complete if there were any significant amounts of commercial, industrial, energy, or agricultural products or materials on the property, whether or not they became involved

Enter up to three codes. Check one box for each code entered.

On-site material (1)

On-site material (2)

On-site material (3)

On-Site Materials Storage Use

1 ☐ Bulk storage or warehousing
2 ☐ Processing or manufacturing
3 ☐ Packaged goods for sale
4 ☐ Repair or service
U ☐ Undetermined

1 ☐ Bulk storage or warehousing
2 ☐ Processing or manufacturing
3 ☐ Packaged goods for sale
4 ☐ Repair or service
U ☐ Undetermined

1 ☐ Bulk storage or warehousing
2 ☐ Processing or manufacturing
3 ☐ Packaged goods for sale
4 ☐ Repair or service
U ☐ Undetermined

D Ignition

D1 1831 Engine Area
Area of fire origin

D2 WW Undetermined
Heat source

D3 WW Undetermined
Item first ignited

D4 WW Undetermined
Type of material first ignited

1 ☐ Check box if fire spread was confined to object of origin.

E1 Cause of Ignition ☐ Check box if this is an exposure report. ☒ Skip to Section G

1 ☐ Intentional
2 ☐ Unintentional
3 ☒ Failure of equipment or heat source
4 ☐ Act of nature
5 ☐ Cause under investigation
U ☐ Cause undetermined after investigation

E2 Factors Contributing to Ignition ☐ None

WW Undetermined
Factor contributing to ignition (1)

Factor contributing to ignition (2)

E3 Human Factors Contributing to Ignition ☒ None

Check all applicable boxes

1 ☐ Asleep
2 ☐ Possibly impaired by alcohol or drugs
3 ☐ Unattended person
4 ☐ Possibly mentally disabled
5 ☐ Physically disabled
6 ☐ Multiple persons involved
7 ☐ Age was a factor

Estimated age of person involved 60

1 ☒ Male 2 ☐ Female

F1 Equipment Involved in Ignition ☒ None ☐ If equipment was not involved, skip to Section G

Equipment Involved

Brand

Model

Serial #

Year

F2 Equipment Power Source

Equipment Power Source

F3 Equipment Portability

1 ☐ Portable
2 ☐ Stationary

Portable equipment normally can be moved by one or two persons, is designed to be used in multiple locations, and requires no tools to install.

G Fire Suppression Factors ☒ None

Enter up to three codes.

Fire suppression factor (1)

Fire suppression factor (2)

Fire suppression factor (3)

H1 Mobile Property Involved ☐ None

1 ☐ Not involved in ignition, but burned
2 ☐ Involved in ignition, but did not burn
3 ☒ Involved in ignition and burned

F150
Mobile property model

License Plate Number

NC 11FTPW14525F
State VIN

H2 Mobile Property Type and Make

1111 Automobile
Mobile property type

F.O. Ford
Mobile property make

Year

Local Use

☐ Pre-Fire Plan Available
Some of the information presented in this report may be based upon reports from other agencies:

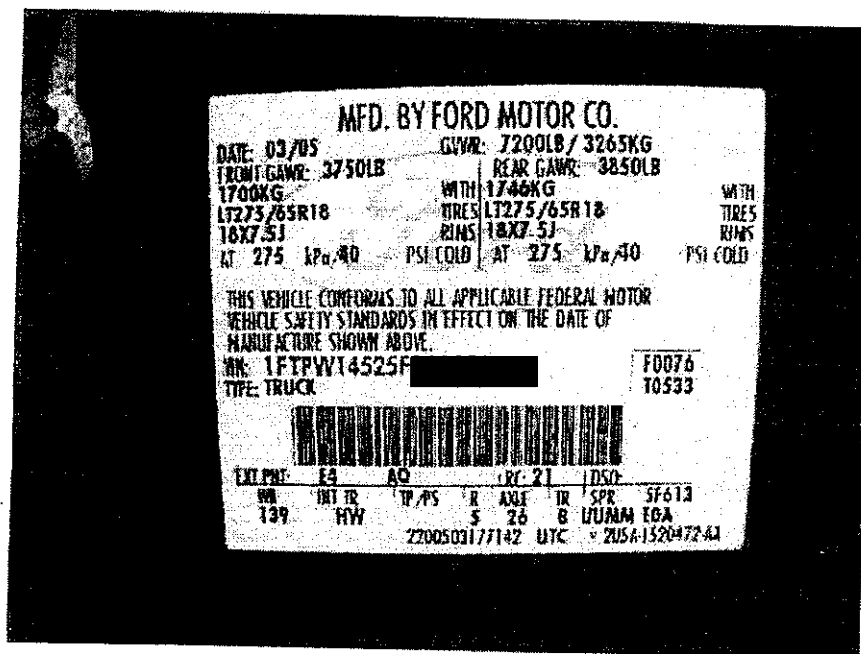
☐ Arson report attached
☐ Police report attached
☐ Coroner report attached
☐ Other reports attached

Structure fire? Please be sure to complete the Structure Fire form (NFIRS-3).

Photograph 1
Subject Ford F-150.



Photograph 2
VIN sticker of subject Ford.



Photograph 3
Left-Front of Ford.



Photograph 4
Right-rear of Ford.



Photograph 5
Fire damage to hood and windshield of Ford.



Photograph 6
Engine compartment of Ford.



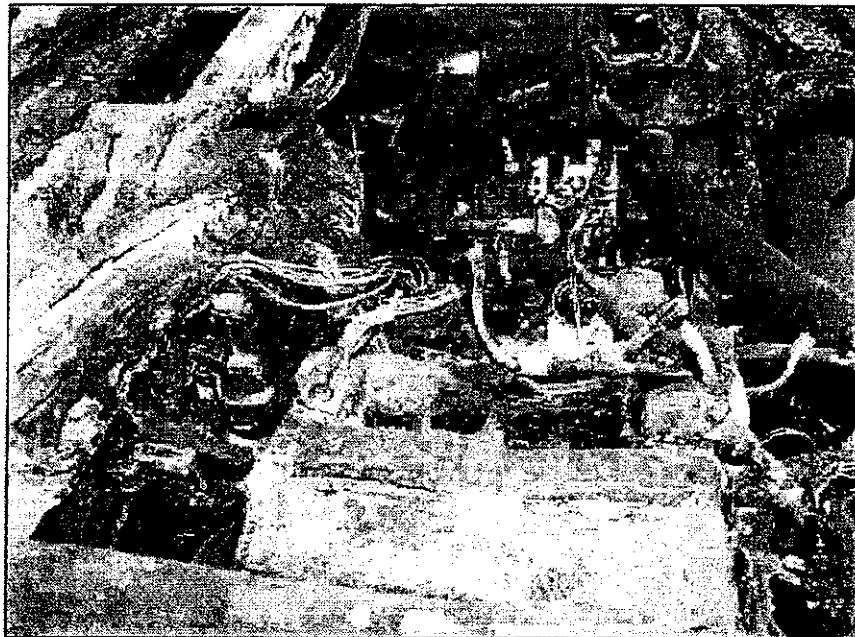
Photograph 7

Damage to top of engine compartment.



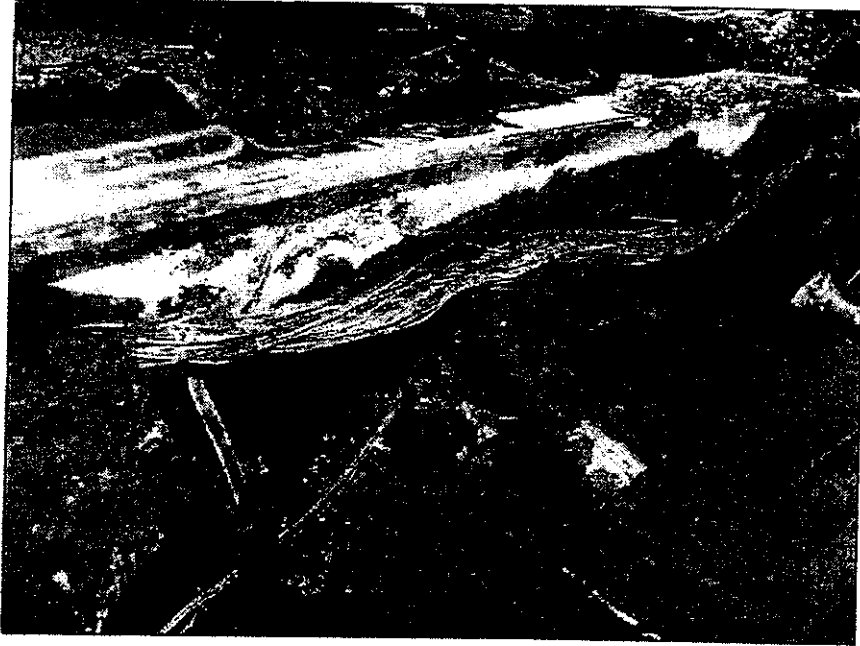
Photograph 8

Damage to battery.



Photograph 9

Sever fire damage to wire harness mount to front of firewall.



Photograph 10

Underside of hood.



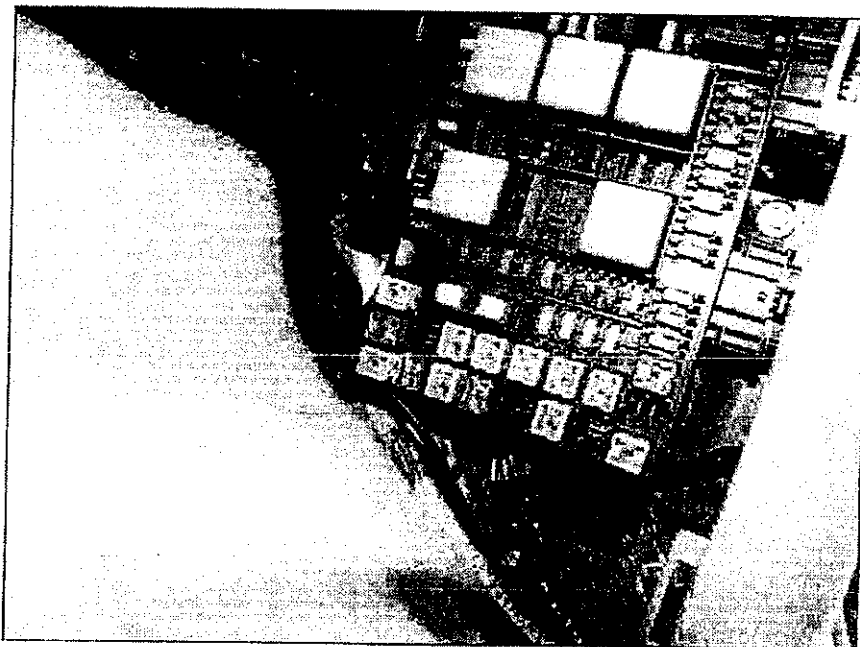
Photograph 11

Area of greatest damage to hood.

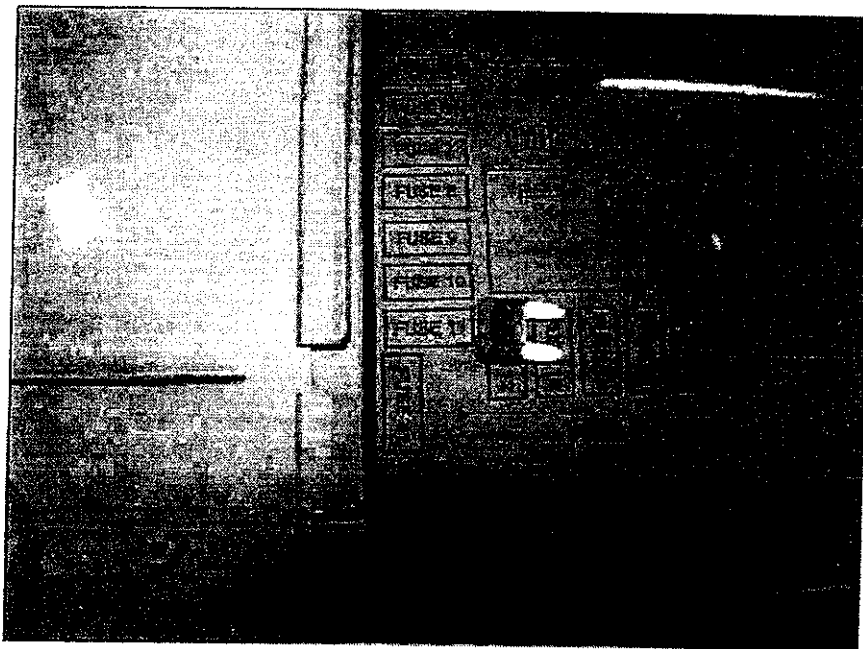


Photograph 12

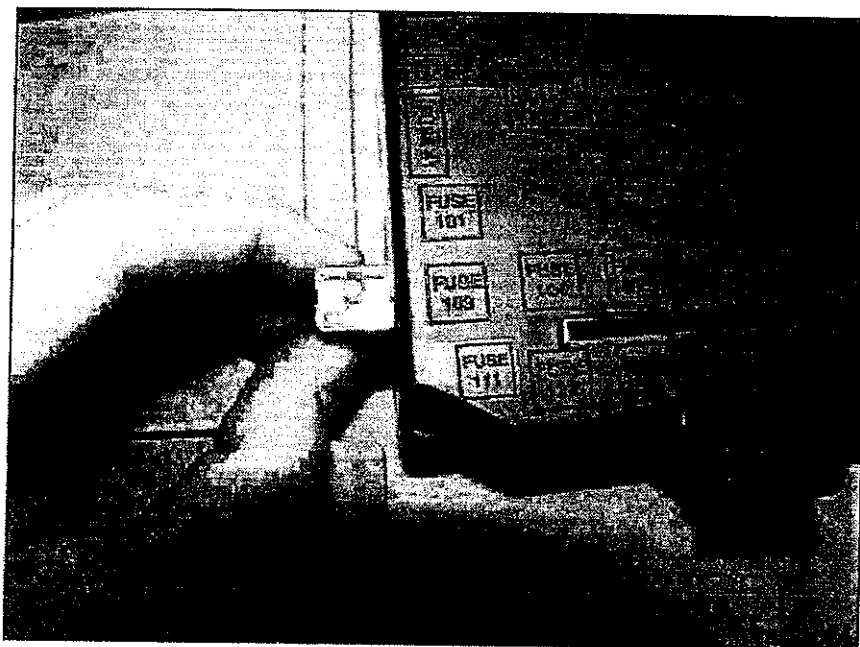
Subject Ford's fuse panel.



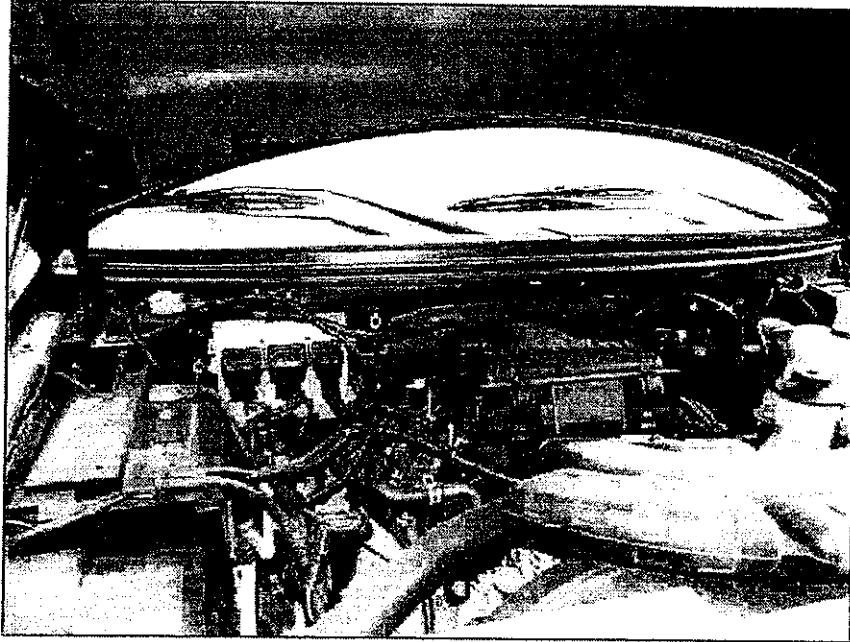
Photograph 13
Blown fuse in number 11.



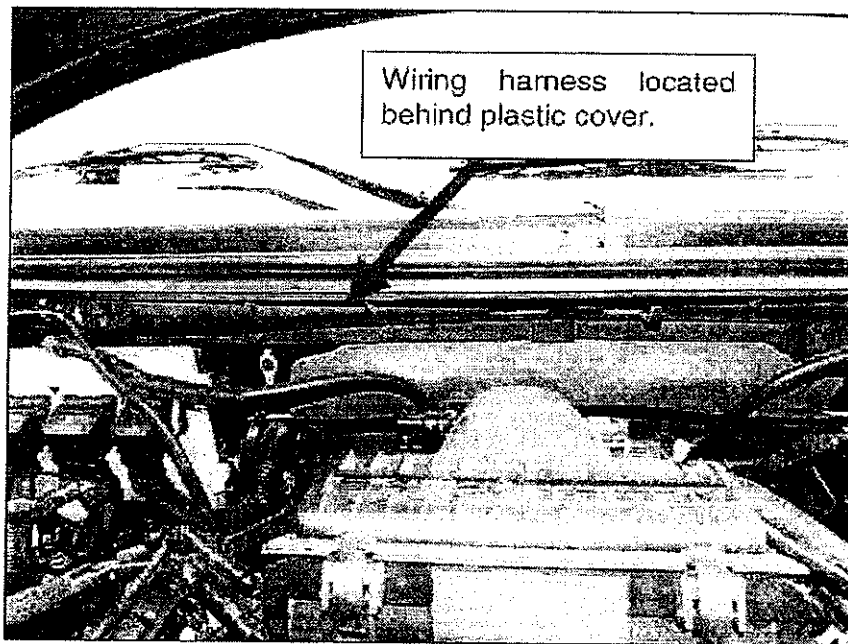
Photograph 14
Blown fuse in number 103.



Photograph 15
Exemplar 2005 Ford F-150.



Photograph 16
Exemplar 2005 Ford F-150.



Scroll down for more content when viewing on computer monitor.



**Report type:
BASIC**

VIN: 1FTPW14525F

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VIN number: 1FTPW14525F
DECODED: Ford - F150 (2005)

Country	UNITED STATES
Make	Ford
Vehicle Type	Pickup Truck
GVWR Class	Class F: 7,001-8,000 lb
Model	F150
Engine Type	V8, 5.4L: SOHC
Check Digit	2
Model Year	2005
Assy. Plant	Dearborn, MI
Production Seq. Number	B00856
Brake System	Hydraulic
Restraint System	Air Bag-2nd Generation
Body Type	4 Door Cab: Styleside; Super Crew
Drive Line Type	4WD
Trim Level	XLT; Lariat; King Ranch; FX4
Vehicle Class	Full-size Pickup
Horsepower	300HP
Fuel Type	Gasoline
Manufacturer	Ford Motor Company
Engine Code	5
JATO	501838/501839/509494/554988
MPG	L4:14-18-16
AAIA	55607/55610/55611
AAIA ENGINE	7583/7583/7583
AAIA LEGACY	1431304/1431306/1431343