

 U.S. Department of Transportation National Highway Traffic Safety Administration		INFORMATION ACT (FOIA), 5 U.S.C. 552(B)(6) 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 JAN 19 2012 22-NOV-2011		Repository ☐ Reference No. 10436760			
OWNER INFORMATION (Type or Print)						Daytime Telephone Number		E-mail Address	
Name						Evening Telephone Number			
Address									
City		State		Zip Code					
WESLEY CHAPEL		FL							
The information you provide will be used to identify potential safety-related defects. We may share your information with the applicable vehicle manufacturer during an investigation or recall in accordance with the routine uses described in the agency's Privacy Act notice. See 49 FR 53971 (Sep. 3, 2004).									
VEHICLE INFORMATION									
17 digit Vehicle Identification Number Located at bottom of windshield on driver's side				Make		Model		Model Year	
1STRW07W71K				FORD		F-150		2001	
Date Purchased		Dealer's Name and Telephone Number				Engine:		Fuel Type:	
June 2001		Freedom Ford				No: Cylinders			
Original Owner		Dealer's City		State		Zip Code			
☒		Clearwater		FL				8. 4.2 Gas	
Transmission Type		☒ Antilock Brakes		Powertrain		Multiple Failure:		Incident Date(s)	
Automatic		☒ Cruise Control				Step Bars		22-NOV-2011	
FAILED COMPONENT(S)/PART(S) INFORMATION									
Vehicle Component Codes: 110000 ELECTRICAL SYSTEM, 185000 VEHICLE SPEED CONTROL: CRUISE CONTROL						Failure Mileage		Failure Speed	
						248000		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: DOTM9ABC036)		☐ Original Equipment		Failure Location:					
☐ Prior Repair									
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		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).									
TL* THE CONTACT OWNS A 2001 FORD F-150 SUPER CREW. THE CONTACT STATED THAT AFTER PARKING THE VEHICLE, HE WAS INFORMED THAT THE VEHICLE WAS ENGULFED IN FLAMES. THE FIRE DEPARTMENT WAS CALLED AND ADVISED THAT THE MODULAR OF THE CRUISE CONTROL WAS THE CAUSE OF THE FIRE. THE MANUFACTURER WAS CONTACTED AND THEY ADVISED THE CONTACT TO TAKE THE VEHICLE TO A DEALER. THE FAILURE AND THE CURRENT MILEAGES WERE APPROXIMATELY 248,000.									
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.									