

[Redacted]
Searcy, A
[Redacted]

Re.: DOL: 1/22/05
Vehicle: 1997 F-150

Ford Motor Company
Office of General Counsel
Parklane Towers West
Suite 300
Three Parklane Boulevard
Dearborn, Michigan 48126-2568

Attention: Shawn L. Norton

Dear Mr. Norton:

This letter is to formally advise you of my intent to pursue a claim with Ford Motor Company for the loss of the above mentioned vehicle. The vehicle was in my father's possession at [Redacted] in Augusta, AR, at the time of loss, and was towed to 1014 S. 6th street in Augusta, AR the same day. We were not aware of the recent Ford recalls at that time, however the vehicle has not been moved since then. You may contact me at the number and/or address above if you have any questions.

[Redacted]

ER05-005-LC1-2435

New

RECEIVED

FEB 02 2005

BEGINNING OF CONTACT
02/02/2005

VOICE OF THE CUSTOMER TRACKING SYSTEM

08.50.05

REGION: 23 MEMPHIS	OGC ISSUE	CASE NBR: 0581540285
VIN: 1FTDX07W2VK	ZONE: A3	OPENED: 02/01/2005
	ENGINE: W	VEH TYPE: T
		CLOSED: 02/01/2005

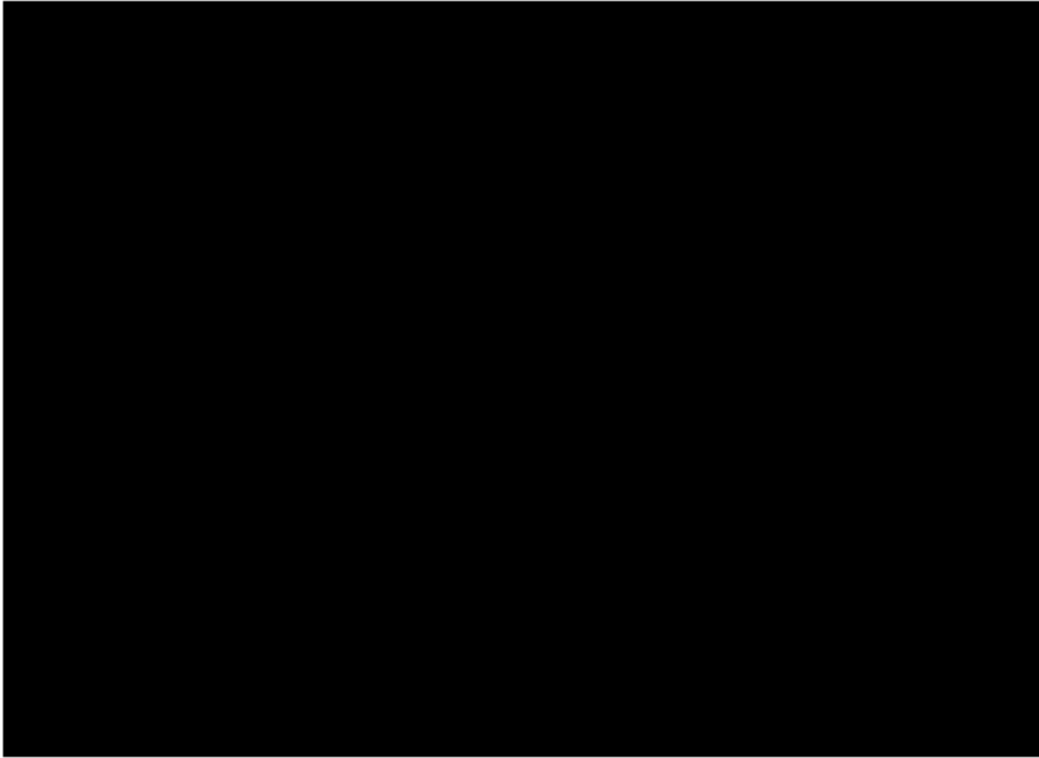
LAST NAME:		FIRST NAME:		STATUS:	CLOSED
TITLE:				MI:	
ADDRESS:		STATE:	AR	ZIP:	
CITY:	AUGUSTA	MODEL:	F150 4X2 SUPERCAB PICKUP		
HOME PHONE:		SALES CODE:	F23590	P & A:	05963
MODEL YEAR:	1997				
MILEAGE:	115000				
DEALER NAME:	W & W FORD SALES IN				
REASON CODE:	0782 LEGAL - ACCIDENT / FIRE				
SYMPTOMS:	801000 GENERAL INQUIRIES REQUEST/NON-VEHICLE RELATED				

ORIGIN: CAC138 - US CONCERN CASE BASE COMMUNICATION: PHONE
 ACTION: 705 - CONTACT ADVANCED TO OGC
 DOCUMENT: ANALYST: SYOUNG60 STEPHEN YOUNG

DATE: 02/01/2005 TIME: 17.07.05 :
ACTION DATA/COMMENTS:

CUSTOMER SAID: - THE CUST IS CALLING RE THE VEHICLE A 1997 F150- THE VEHICLE CAUGHT ON FIRE WHILE IT WAS PARKED- THERE IS DAMAGE TO THE SIDE OF THE HOUSE- THE VEHICLE HAS BEEN TOTALLED- FIRE DEPT WAS CALLED- STATED THAT THE FIRE STARTED UNDER THE HOOD AND WAS AN ELECTRICAL FIRE- POLICE CALLED THE OWNER TO WAKE TO HIM UP - THE CUST FEELS THAT THIS WAS A DEFECT THAT CAUSED THE FIRE DEALER SAID: - NONECRC ADVISED: I WILL FORWARD THIS INFORMATION TO THE FORD OGC DEPARTMENT. YOU WILL BE CONTACTED WITHIN 3-5 BUSINESS DAYS.- CASE BASE AS PER T/L PETER 6336

FORD MOTOR COMPANY
 RECEIVED
 IMS
 FEB 02 2005
 OFFICE
 GENERAL COUNSEL



APR 19 2005

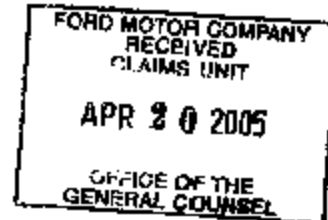


FARMERS

National Document Center
P.O. Box 268992
Oklahoma City, OK 73126-8992
claimedocument@farmersinsurance.com
FAX : 877-27-1389

04/08/2005

Ford Motor Co. C/O Consumer Affairs
Po Box 6248, Dept Md-3ue-B
Dearborn, MI 48126



Re: Our Insured: [REDACTED]
Our Claim #: [REDACTED]
Date of Loss: 02/09/2005
Your Claim #: [REDACTED]
Amount Owed: \$9,779.10

Dear Ford Motor Co. C/O Consumer Affairs:

We have made payment to our insured for damages resulting from this accident. Our investigation has established that the above loss was caused by the negligence of your driver. By virtue of our subrogation rights this letter is to advise you that we expect payment from you for the amount of damages within 14 days of the receipt of this letter.

Be advised that no partial payment, which is less than the full amount claimed herein, will be considered in any way an acceptance of benefits, a novation or an accord and satisfaction of this claim without the express written release of our claim executed by an individual who identifies himself/herself as a member of our subrogation department. Therefore, our legal rights to enforce collection on the remaining amount of the claim shall not be waived or estopped due to a partial payment by you.

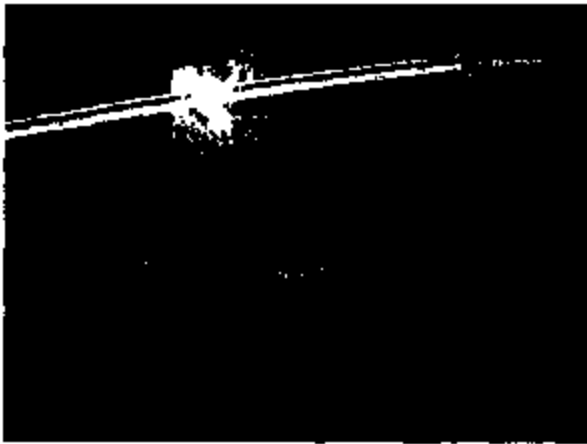
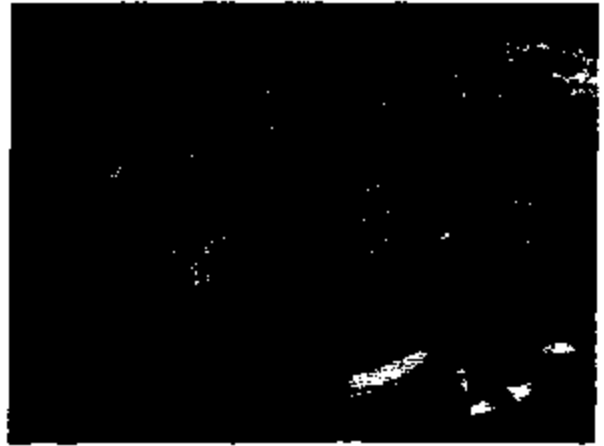
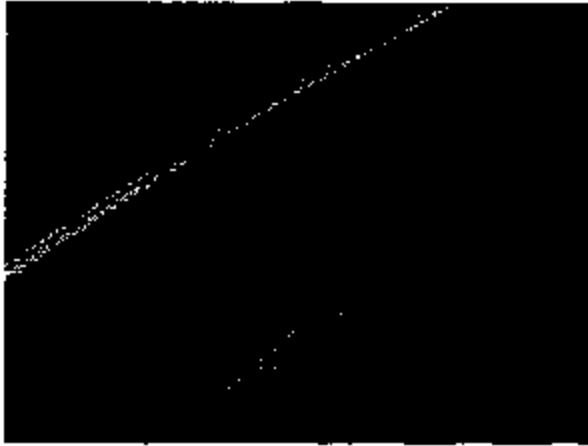
If you need additional support for our claim or require further information, please call me at 602-293-4770 with your FAX number so that the requested information can be sent to you.

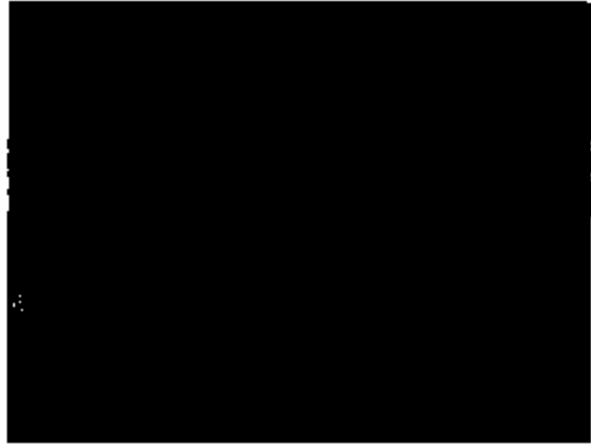
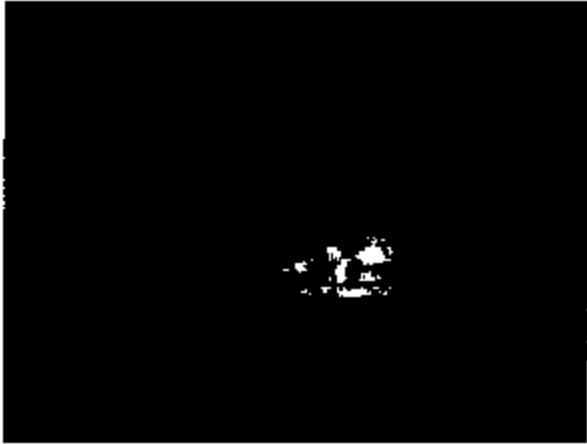
Sincerely,
Farmers Insurance Company of Arizona

Joanna Vegas
Auto Subrogation Representative
joanna.vegas@farmersinsurance.com
ATTACHMENT(S)

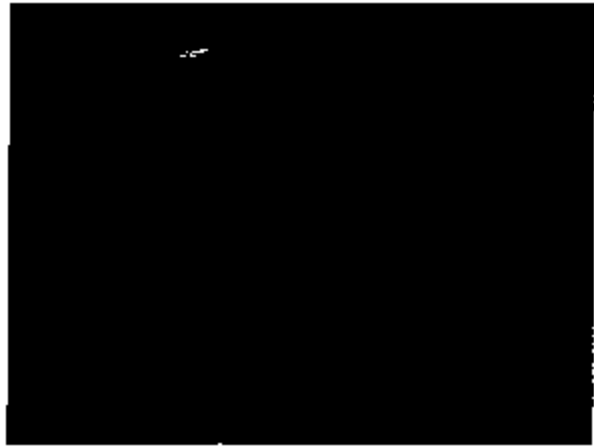
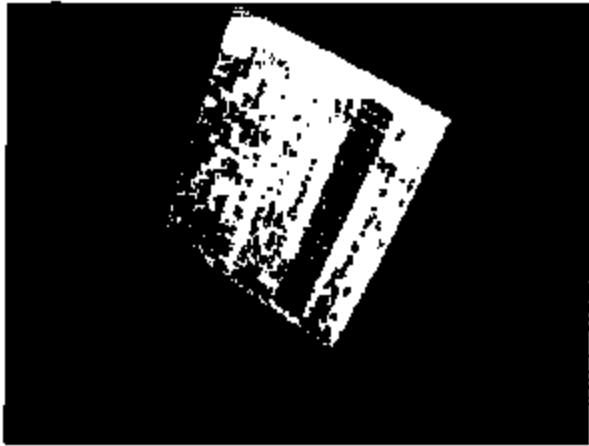
ER05-003-LC1-2437

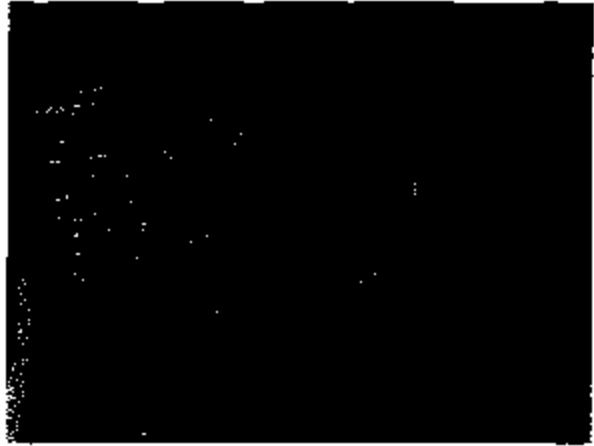






EGG-885-LC1-2448





ERG-005-LC1-2442

B Location

Check this box to indicate that the address for this incident is provided on the address label on the back of this form. If not, the address label on the back of this form is the address for this incident.

Address: [REDACTED]

City: St. Charles State: MO Zip: [REDACTED]

Apartment/Unit: [REDACTED] City: [REDACTED] State: [REDACTED] Zip: [REDACTED]

Street: [REDACTED]

C Incident Type

111 Building Fire

Check boxes to indicate the type of incident. If more than one type of incident is reported, check all that apply.

Alarm: Alarm Alarm Alarm

Time: 08 04 2003 22:18:11

D Aid Given or Received

1 Medical aid received

2 Ambulance aid received

3 Medical aid given

4 Ambulance aid given

5 Other aid given

6 None

Other: 00104

E1 Date & Times

Arrived: 08 04 2003 22:22:28

Departed: 08 05 2003 01:01:39

F Actions Taken

11 Extinguish

Primary Action Taken (1): [REDACTED]

Additional Action Taken (2): [REDACTED]

Additional Action Taken (3): [REDACTED]

G1 Resources

Apparatus Personnel: 0004

Suppression: 0004

Other: [REDACTED]

G2 Estimated Dollar Losses & Values

Property: \$ 000, 000

Contents: \$ 000, 000

Other: \$ 000, 000

Completed Modules

Fire-1

Structure-1

Civil Fire CAS-1

Fire Rev. CAS-1

Fire-2

Fire-3

Fire-4

Fire-5

Fire-6

Fire-7

Fire-8

Fire-9

Fire-10

Fire-11

H1 Casualties

Deaths: [REDACTED]

Injuries: [REDACTED]

Other: [REDACTED]

H2 Hazardous Materials Release

1 None

2 Natural Gas: gas leak, or propane or kerosene release

3 Petroleum gas: oil or kerosene or gas leak

4 Acids: acids that leak or spill

5 Explosives: gas tanks, equipment or propane storage

6 Flammable Gas/Flammable Liquid: gas or liquid that leak or spill

7 Flammable Solid/Flammable Powder: powder that leak or spill

8 Toxic: gas, liquid or solid that leak or spill

9 Other: liquid, gas, solid, or other that leak or spill

I Mixed Use Property

00 Not Mixed

10 Residential use

20 Commercial use

30 Industrial use

40 Residential use

50 Industrial use

60 Military use

70 Other mixed use

J Property Use

Structures

131 Church, place of worship

161 Restaurant or cafeteria

162 Bar/ Tavern or nightclub

213 Elementary school or kindergarten

218 High school or junior high

241 College, adult education

311 Care facility for the aged

321 Hospital

Outside

124 Playground or park

555 Camp or campground

660 Forest (highland)

607 Outlying storage area

918 Dump or sanitary landfill

931 Open bank or field

341 Clinic, clinic type infirmary

342 Doctor/dentist office

361 Prison or jail, not juvenile

419 1- or 2-family dwelling

420 Multi-family dwelling

430 Apartment/apartment house

440 Commercial hotel or motel

441 Residential, board and care

444 Dormitory/school

518 Food and beverage sales

538 Vehicle lot

539 Storage/warehouse for motor vehicles

546 Lake, river, stream

581 Railroad right of way

580 Other street

581 Highway/divided highway

582 Residential street/ driveway

530 Household goods, sales, repairs

579 Motor vehicle/boat, sales/repair

571 Gas or service station

599 Business office

618 Electric generating plant

620 Library/science lab

700 Manufacturing plant

819 Warehouse/warehouse (storage/haul)

882 Non-residential parking garage

881 Warehouse

981 Construction site

984 Industrial plant yard

Indicate and enter a property use code only if you have the location of property for loss.

Property Use: 119

1 or 2 family dwelling

Business name (if applicable) _____ Area Code _____ Phone Number _____

Mr., Mrs., Mr. _____ Jr. _____

Address _____

City _____ St. Charles

State _____ Zip Code _____

More people involved Check this box and attach Supplemental Forms (SF223-12) as necessary

Owner Name of person involved? _____

Business name (if applicable) _____ Area Code _____ Phone Number _____

Mr., Mrs., Mr. _____ Jr. _____

Address _____

City _____ St. Charles

State _____ Zip Code _____

I. Remarks

Local System

9432 responded as part of a first alarm assignment to a structure fire. 9200, 9214 and 9417 arrived on the scene and reported heavy fire involvement to the garage and roof of the structure, and that the building was evacuated. 9432 arrived and the first three units stretched hand lines to protect exposures and initiate fire attack. A supply line was established to 9432 and 9214. 9401 arrived on the scene and command was established. A second alarm was requested. After water supply was established additional hand lines were laid and fire was brought under control. Overhaul and salvage operations were initiated with second alarm personnel. Heavy damage was sustained by the exposure building on side "D." Command ordered the exposure building on side "D" be investigated for possible fire extension and to protect the damaged area from the weather. Overhaul continued on the building of origin until command was satisfied all remaining hotspots were extinguished. Second alarm units were released at approximately 0030 hrs.

I conducted a preliminary investigation interview with the homeowners _____ stated that he had arrived home at approximately 1530 hrs and had parked his truck in the garage. At approximately 2200 hrs the homeowners stated they heard noises coming from the garage. As they entered the garage from the living quarters they immediately noticed smoke issuing from underneath the driver side front wheel area of the truck. _____ stated that he thought he heard the starter motor of the truck running as the fire intensified. He then opened the garage door and removed his wife's car. _____ stated that she exited the building and called 911 on her cell phone. _____ further stated that he and some of his neighbors attempted to fight the fire with a garden hose but the fire intensity drove them out of the garage. _____ further stated that they had experienced electrical problems with the vehicle previously.

Due to the extreme damage to the vehicle from the fire it was not possible to remove it from the garage and at this time the cause of the fire is unable to be determined. C60 Capt.

*3 pages
attached
page*

II. Authorization:

113206 _____ DAILY, RICHARD P _____ DC _____ 06 05 2003

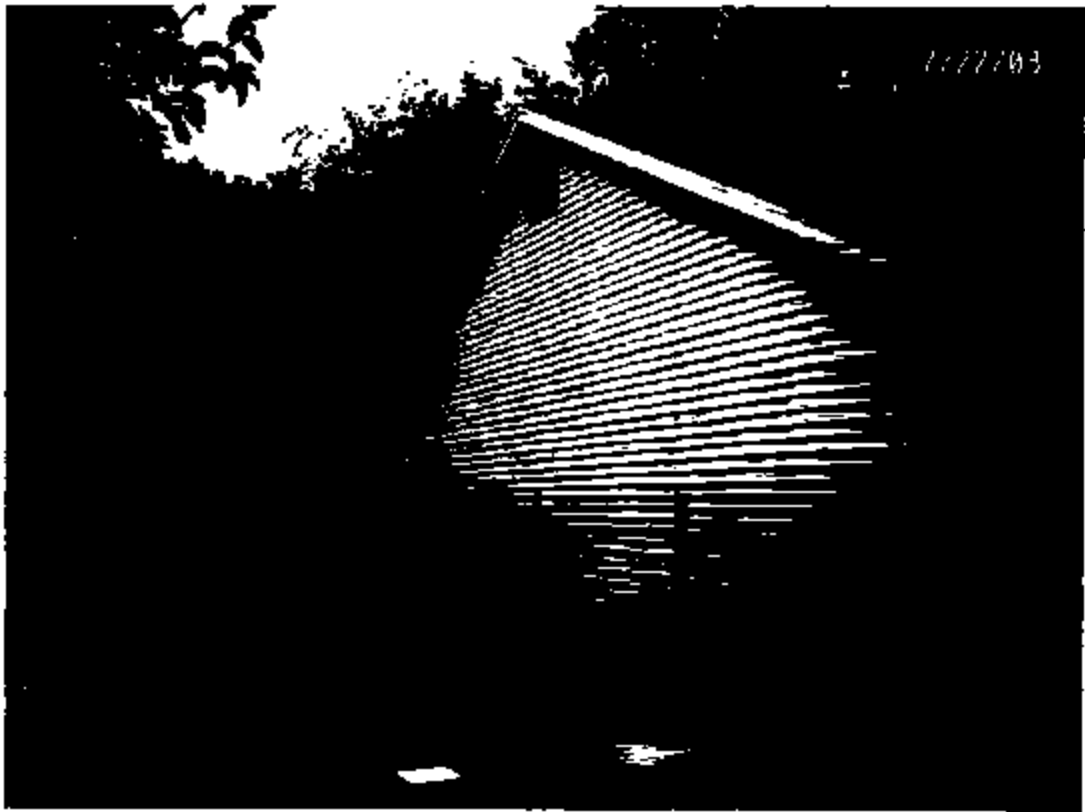
Signature of Chief _____ Station _____ Rank _____ Assignment _____ Month _____ Day _____ Year _____

72 _____ LOCKER, EARL _____ CAP _____ 06 05 2003

Signature of Chief _____ Station _____ Rank _____ Assignment _____ Month _____ Day _____ Year _____



EROS-885-LC1-2445



ERG-805-LC1-2446



E005-005-LC1-2447



1/22/03

ENG5-805-LC1-2448



EA85-085-LC1-2449



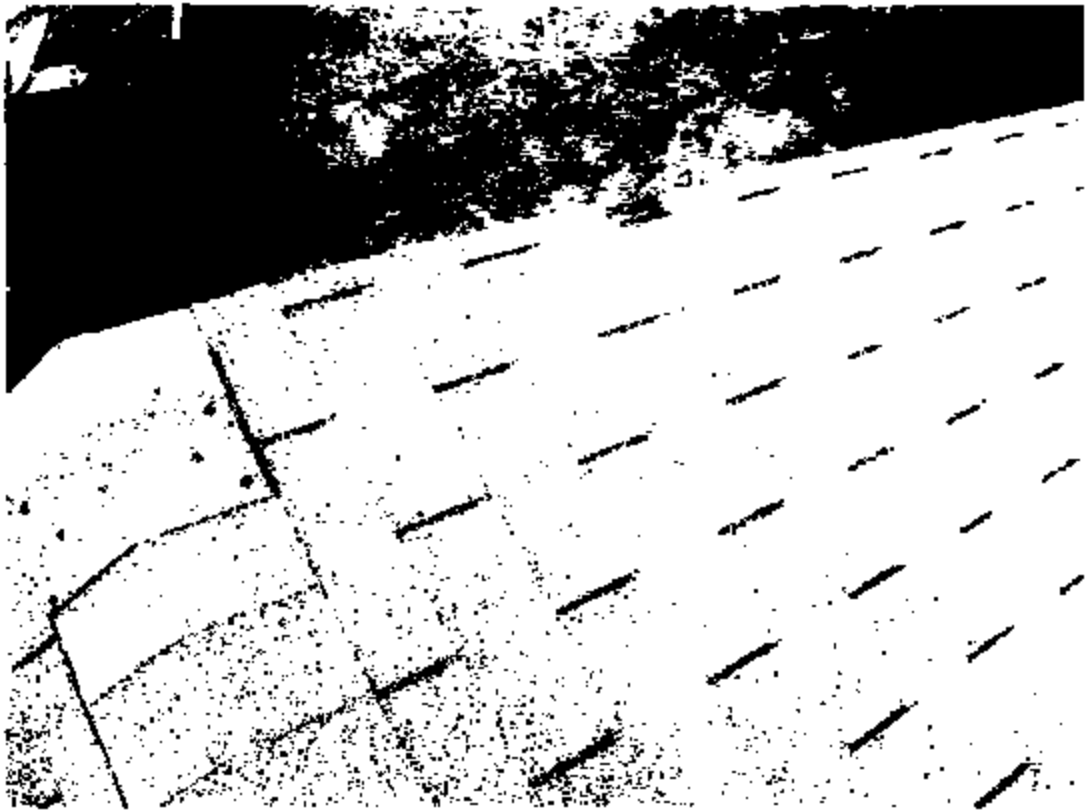
EROS-005-LC1-2450



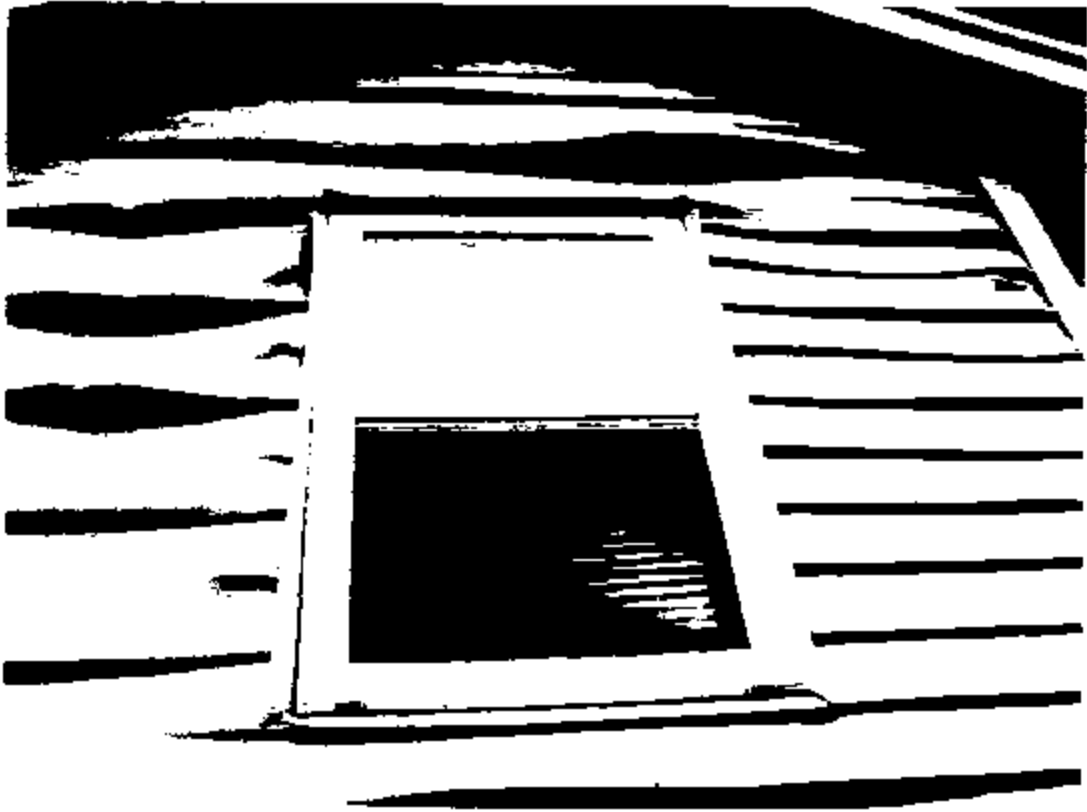
EGGS-005-LC1-2451



EA05-005-LG1-2452



ER05-005-LC1-2453



ER05-005-LC1-2454



ERSS-885-LC1

State Farm Insurance Companies



November 21, 2003

P.O. Box 6071 (Correspondence)
P.O. Box 6036 (Payments)
Columbia, MO 65208

Hours: M-F 7:00 a.m. - 5:30 p.m.

Shawn L. Norton
Ford Motor Company
Parklane Towers West, Ste 300, Three Parklane Blvd
Dearborn, MI 48126-2568

RE: Claim Number: [REDACTED]
Date of Loss: June 4, 2003
Our Insured: [REDACTED]

RECEIVED NOV 26 2003

Dear Mr. Norton:

This letter is to put your company on notice of a fire loss involving a 1995 Ford Pickup Standard Cab, VIN: 1FTRF14H5SM [REDACTED] owned by [REDACTED] vehicle caught fire in his garage. Mr. French's home is a neighboring property to [REDACTED].

According to our information, your company has already been put on notice of this loss from [REDACTED] auto and homeowners insurers.

Enclosed please find our supporting documentation on this claim. Please communicate your position at your earliest convenience.

Sincerely,

Karla Davison

Karla Davison
Claim Representative
(573) 499-3085

State Farm Fire and Casualty Company

HOME OFFICES: BLOOMINGTON, ILLINOIS 61710-0001

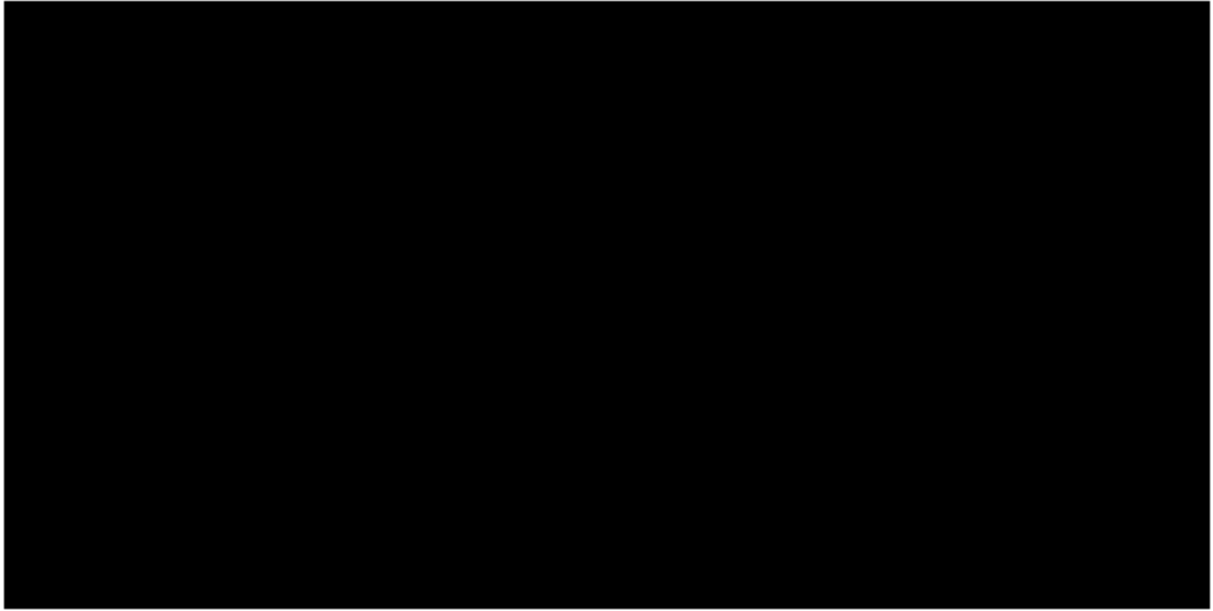
ER85-805-LC1-2458

*Handled
Albers*

*105 T-150
VIN
St. Charles, MO
A7759*



(nothing to copy)



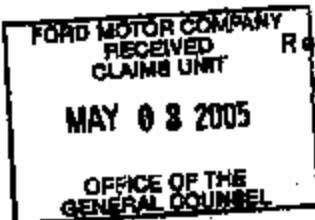
THOMAS GEORGE ASSOCIATES, LTD
TGA
Insurance Recovery Division
Post Office Box 30
East Northport NY 11731 0030
(800) 443-8338

MAY 03 2005

06-1
SUB

April 18, 2005

FORD MOTOR COMPANY CONSUMER AFFAIRS
PO BOX 6248MD-3NE-8
DEARBORN, MI 48126-0000



Re: Liberty Mutual Insurance "HD"
OUR CASE NUMBER: 245753-061
Amount Due: \$2,982.25
Date of Loss: 03/18/05
Claim Number: [REDACTED]

We have been retained by the above named client to aid them in the investigation of the accident and or loss in which you were involved.

If you were covered by liability insurance on the date of the accident and or loss, kindly provide us with the name of the insurance company and your policy number, or the name of your agent or broker, in the spaces below. If this information was previously provided to someone else, kindly re-confirm below.

INSURANCE COMPANY _____

POLICY/CLAIM# _____

ADJUSTER/BROKER _____ Phone# _____

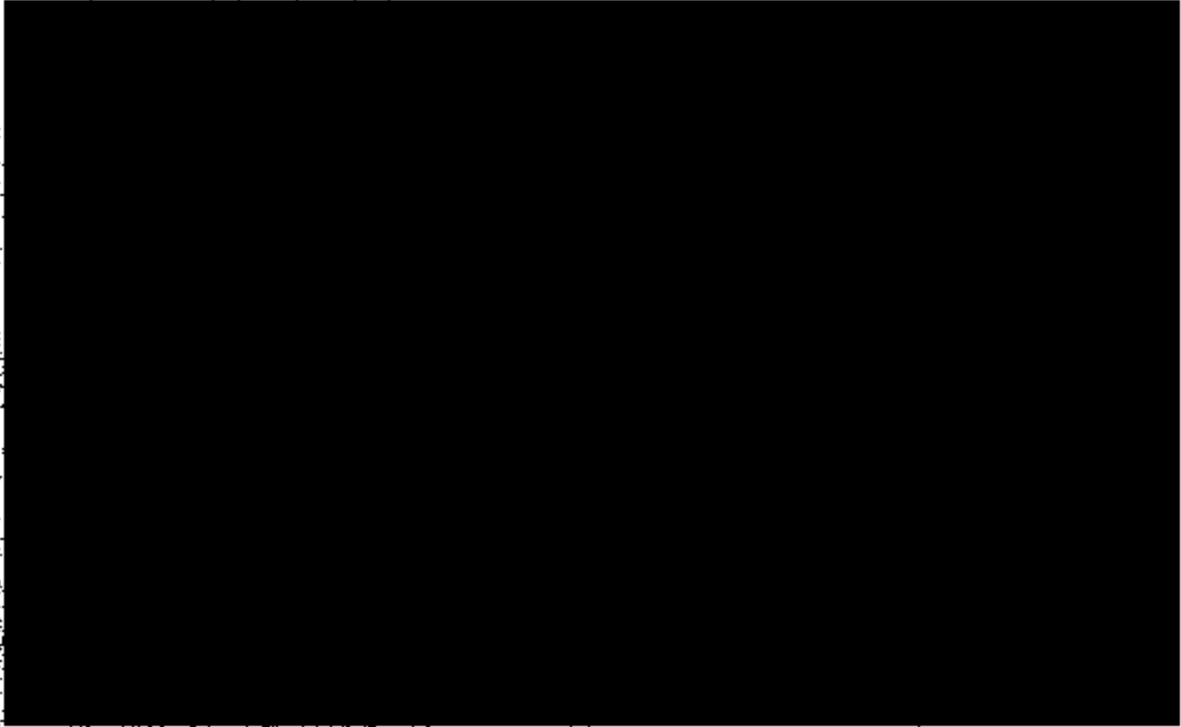
Unless you, within thirty (30) days after receipt of this notice, dispute the validity of this debt, or any portion thereof, the debt will be assumed to be valid.

If you notify us in writing within the aforementioned thirty day period, that the debt or any portion thereof is disputed, we will obtain verification of the debt or a copy of a judgment against you if one exists, and mail a copy of the verification or judgment to you. We will also provide you with the name and address of the original creditor if different from the current creditor, if requested in writing within the above thirty (30) day period.

This communication is from a debt collector and is an attempt to collect a debt, any information obtained will be used for that purpose.

If you were not insured on the DOL contact the undersigned to make payment arrangements.

W. Wonders
W. WONDERS





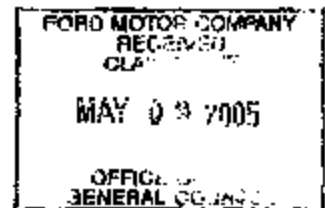
FARMERS

National Document Center
P.O. Box 268992
Oklahoma City, OK 73126-8992
claimsdocument@farmersinsurance.com
Fax : 877-217-1389

MAY 09 2005

05/02/2005

Ford Motor Company
Consumer Affairs
Attn: Shawn Norton
P O Box 6248/Mail Code Md-3nc-B
Dearborn , MI 48126



Re: Our Insured: [REDACTED]
Loss Date: 04/04/2005
Claim Number: [REDACTED]
Total Amount Owed: \$17,257.5

Dear Sir or Madam,

A review of the facts of the above loss indicates that your product failed and caused damage to our insured's property. We have made payment to our insured for these damages, and now seek reimbursement from you. **WE RESPECTFULLY ASK THAT YOU NOT RESPOND TO OUR REQUEST WITH A FORM LETTER.**

You will find this correspondence and its enclosures contain substantive information and support adequate for your firm to make a decision concerning your liability. ***The vehicle will be available for your inspection during the next 60 days. Afterwards, we will be required to attempt to sell the salvage.***

The entities in the stream of commerce, such as you, a manufacturer, are liable in both negligence and product liability. As you know, your obligation is to properly design and test, manufacture, and give appropriate instructions for installation and use of your product.

Your product did not meet the expectations of my insured, the consumer. Your product failed and caused the loss resulting in damages of 17,257.5. Attached are documents substantiating payment.

It is our desire to settle this claim without causing you the additional time and cost of litigation or arbitration. After reviewing the enclosed, please call me to discuss resolving this matter.

ER05-005-LC1-2458

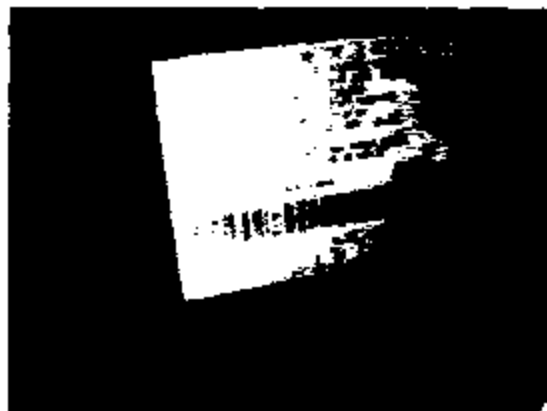
Sincerely,
Mid-Century Insurance Company of Texas

Scott Sheffield

Scott Sheffield
Auto Subrogation Representative
512-238-5739

ENCLOSURES

ER05-005-LC1-2450



VIN



VIN



LT FRT INTERIOR



PART OF THE MASTER CYLINDER



PART OF THE MASTER CYLINDER



LT FRT INTERIOR



FRT INTERIOR



LT REAR INTERIOR



LT REAR DOOR



LT FRT



LT FRT



FRT OF TRK



MOTOR



RT FRT



RT FRT



RT FRT INTERIOR



RT SIDE



RT REAR



RT REAR



REAR & LIC PLATE



LT REAR



LT SIDE



BACK GLASS



LT SIDE



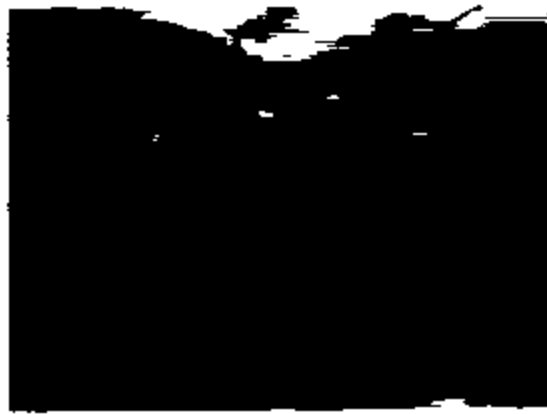
LT REAR TIRE



RT REAR INTERIOR



CD CHANGER & JACK



ROOF LESS HEADLINER



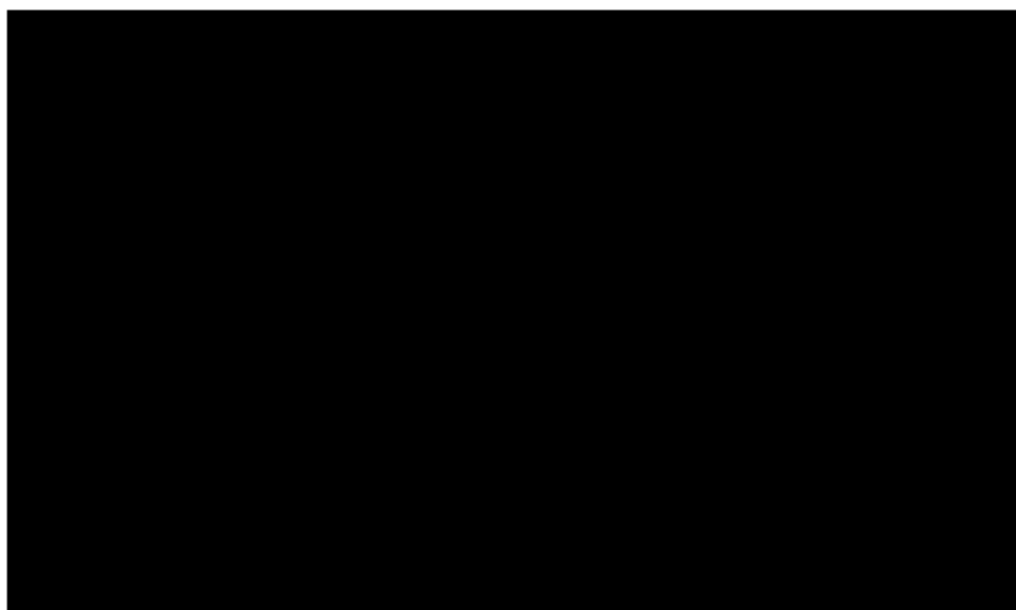
RT REAR DOOR



DASH AREA



MASTER CYLINDER AREA





USAA CASUALTY INSURANCE COMPANY
P.O. Box 33490, San Antonio, TX 78265

SHAWN NORTON
FORD MOTOR CO.
CONSUMER AFFAIRS
OFFICE OF GENERAL COUNCIL
P.O. BOX 6248 MD-3 NE-B
DEARBORN, MI 48126

2005 MAY 17 A 9 09
CUSTOMER
RELATIONSHIP
CENTER

May 11, 2005

Policyholder: [REDACTED]
Reference Number: 5323000-7101-6-7644
Date Of Loss: January 14, 2005
Loss Location: Boyton, Florida
USAA Tax ID Number: [REDACTED]
Your Policyholder: Ford Motor Co
Your Reference Number: Unknown

0

Dear Mr Norton:

Our investigation reveals that your insured is responsible for damages sustained in this loss.

This is to notify you of our subrogation interests and to request that you not make any settlements on this claim without protecting our recovery rights.

Our claim payments are documented below:

Collision Amount Paid	\$	21,719.25
Insured's Deductible	\$	500.00
Total Subrogation Demand	\$	22,219.25

Please forward your check, referencing # 5323000-7101-6-7644, in the amount of our total subrogation demand. Make your check payable to USAA as subrogee of our policyholder. Please include our reference number on your check to allow us to identify your payment to our claim and avoid additional demands or an arbitration filing.

Remit Payment To:

USAA
ATTN: Insurance Claims
P.O. Box 33490
San Antonio, TX 78265-3490

Be aware that no partial payment to USAA that is less than the full amount claimed herein will be considered in any way a satisfaction of this claim without an express written release of our claim executed by an individual who identifies himself/herself as a member of our Subrogation Department. Therefore, our legal rights to enforce collection on the remaining amount of the claim shall not be waived or estopped due to a partial payment by you or someone acting on your behalf.

If you wish to discuss this matter, please contact me.

Sincerely,

Maggie Vernon

Maggie Vernon
Claims Subrogation Specialist
Subrogation Department
Phone: 1-800-531-8222 Ext. 76939
Fax Phone: 210-498-5946

Encl: Support Docs



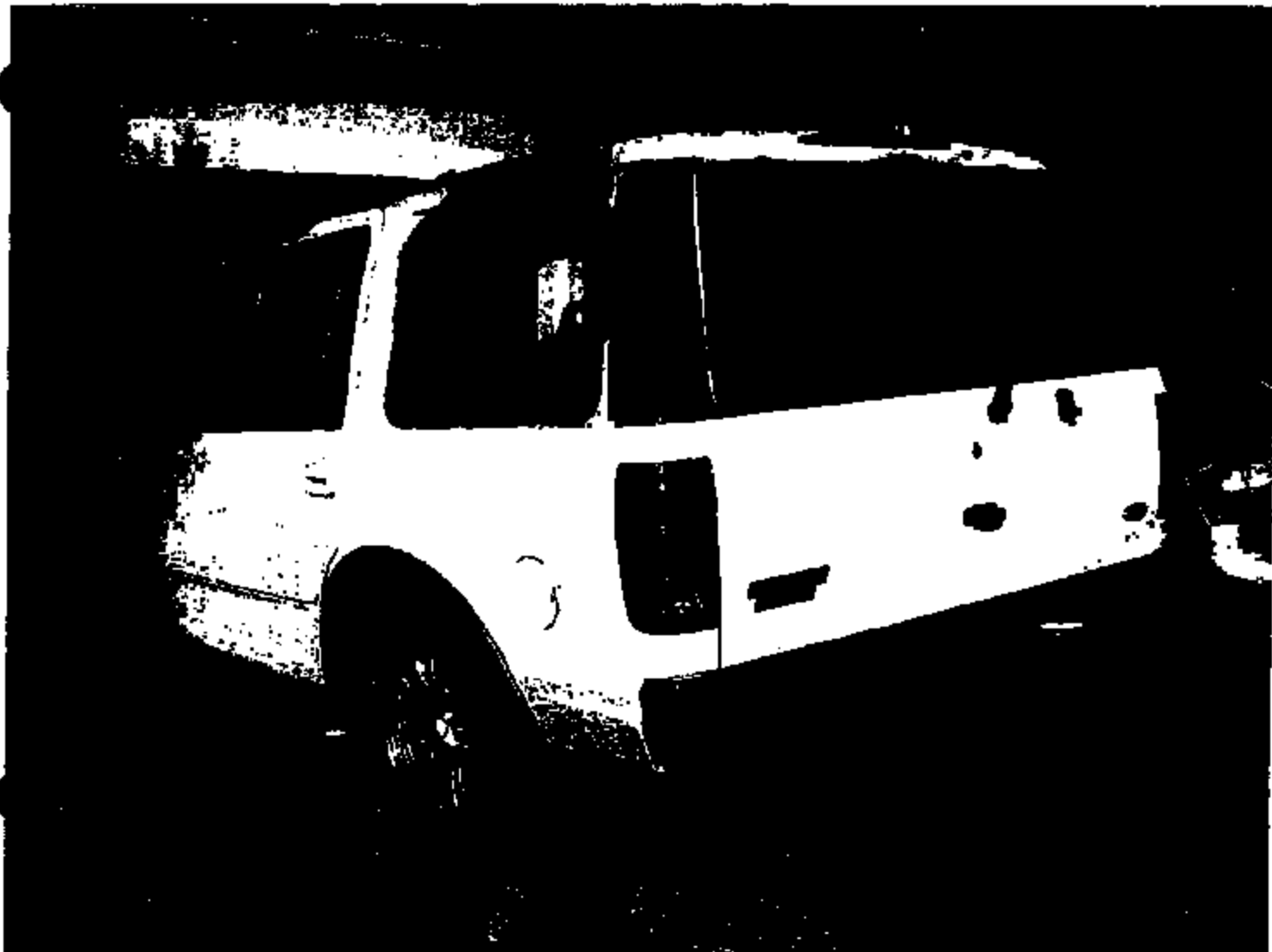
DATE CREATED: 2005-01-17 10:37:30

DESCRIPTION: 1/1 [REDACTED] R/R VIEW - REAR DOOR DAMAGED, ROOF, R/CTR, RS GLASS
(E. BENE)

Field Assignment Attachment Note Version 1.0

CREATED: 2005-01-17 10:37:30 ORIGIN: FILE

1/11 GUYNN: R/R VIEW - REAR DOOR DAMAGED, ROOF, R/CTR, RS GLASS (E. BENE)



DATE CREATED: 2005-01-17 10:37:44

DESCRIPTION: L/R VIEW - L/S GLASS, L/S DOORS, L/QTR, ROOF

Field Assignment Attachment Note Version 1.0

CREATED: 2005-01-17 10:37:44 ORIGINAL FILE

L/R VIEW - L/S GLASS, L/S DOORS, L/QTR, ROOF



DATE CREATED: 2005-01-17 10:37:58
DESCRIPTION: COMPLETE INTERIOR.

Field Assignment Attachment Note Version 1.0
CREATED: 2005-01-17 10:37:58 ORIGINAL FILE

COMPLETE INTERIOR



DATE CREATED: 2005-01-17 10:38:09
DESCRIPTION: L/T OVERALL VIEW OF VEN

Field Assignment Attachment Note Version 1.0
CREATED: 2005-01-17 10:38:09 ORIGIN: FILE

L/T OVERALL VIEW OF VEN



DATE CREATED: 2005-01-17 10:38:24

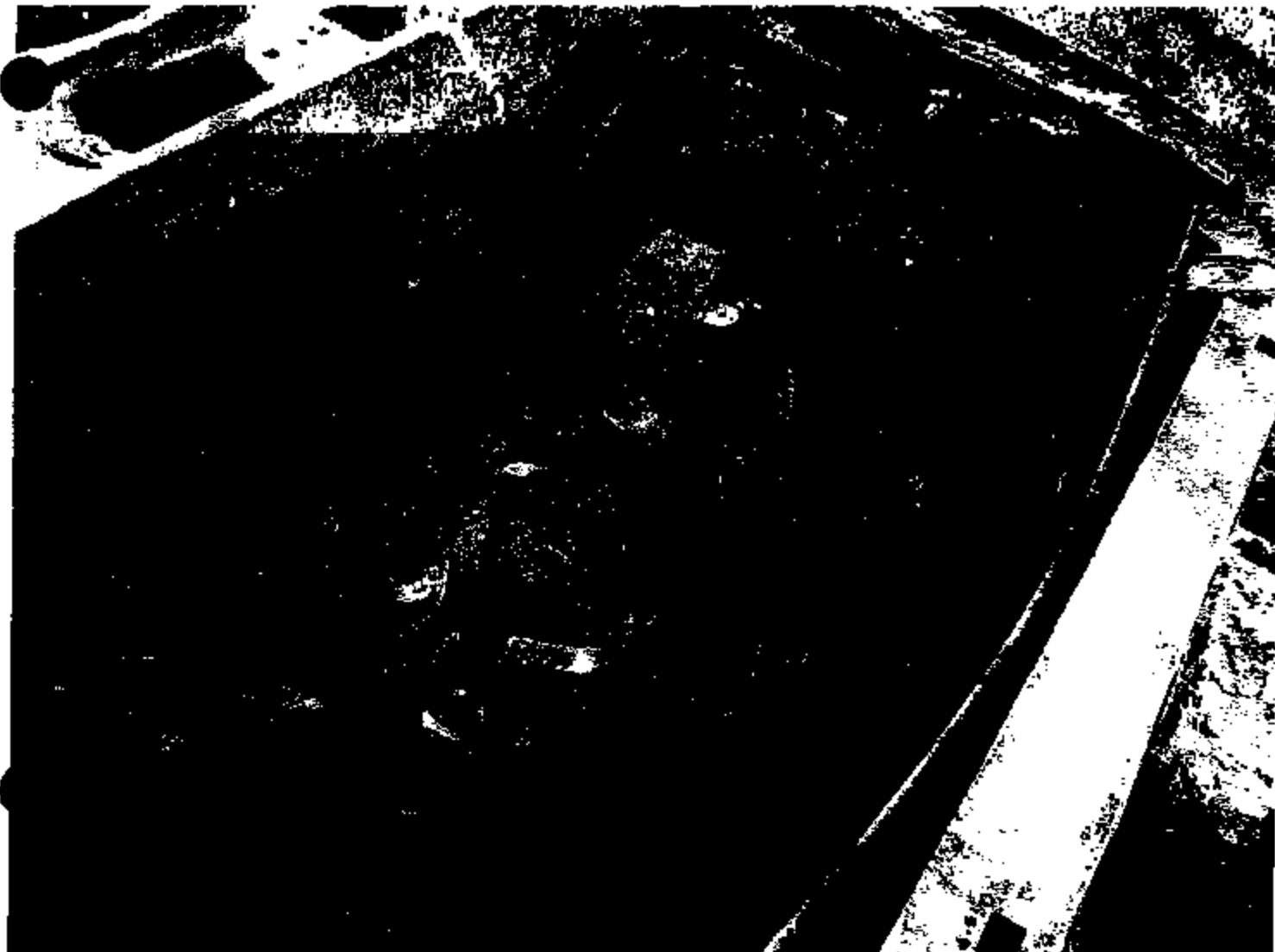
DESCRIPTION: RE VIEW - RE REAR MOVED TO RE TO AUDI

Field Assignment Attachment Note Version 1.0

CREATED: 2005-01-17 10:38:24 ORIGINAL FILE

RE VIEW - RE REAR MOVED TO RE TO AUDI

ENR5-685-LC1-2474



DATE CREATED: 2005-01-17 10:38:53
DESCRIPTION: ENGINE COMP

Field Assignment Attachment Note Version 1.0
CREATED: 2005-01-17 10:38:54 ORIGIN: FILE

ENGINE COMP



DATE CREATED: 2005-01-17 10:41:50

DESCRIPTION: EXPEDITION & AUDI SIDE BY SIDE IN DRIVEWAY

Field Assignment Attachment Note Version 1.0

CREATED: 2005-01-17 10:41:50 ORIGIN: FILE

EXPEDITION & AUDI SIDE BY SIDE IN DRIVEWAY



MAY 16 2005

BEGINNING OF CONTACT
05/14/2005

VOICE OF THE CUSTOMER TRACKING SYSTEM

08.35.57

REGION: 21 ATLANTA	OGC ISSUE	CASE NBR: 0525001336
VIN: 1FTRW07W31K	ZONE: B2	OPENED: 05/13/2005
	ENGINE: W VEH TYPE: T	CLOSED: 05/18/2005
LAST NAME:	FIRST NAME:	STATUS: CLOSED
TITLE:		MI:
ADDRESS:		
CITY: CAMDEN	STATE: SC	ZIP:
HOME PHONE:		
MODEL YEAR: 2001	MODEL: F150 4X2 CREWCAB FLARESIDE	
MILEAGE: 2		
DEALER NAME: REDFEARN MOTOR COMP	SALES CODE: F21277	P & A: 00925
REASON CODE: 0792 LEGAL - ACCIDENT / FIRE		
SYMPTOMS: 704345 FIRE/SMOKE SCORCHED/BURNT UNDERHOOD		

ORIGIN: CAC138 - US CONCERN CASE BASE COMMUNICATION: PHONE
 ACTION: 705 - CONTACT ADVANCED TO OGC
 DOCUMENT: ANALYST: MMARSH27 MARSHA MARSHALL

DATE: 05/13/2005 TIME: 14.42.07:
 ACTION DATA/COMMENTS:

FORD MOTOR COMPANY
 RECEIVED
 CLERK
 MAY 16 2005
 OFFICE OF THE
 GENERAL COUNSEL

CUSTOMER SAID: - VEH CAUGHT ON FIRE ON SUNDAY - FIRE DEPT WAS CALLED - FIRE REPORT RECEIVED - CONTACTED INSURANCE COMPANY - INSURANCE COMPANY PULLED VEH FROM HOUSE AND DID AN INVESTIGATION - FIRE DAMAGED HOME, BURNED TREES AND SHRUBS - LOTS OF SMOKE DAMAGE - PAINTING NEEDS TO BE DONE AND WHOLE FRONT WINDOW NEEDS TO COME OUT - I WANTED TO KNOW IF THERE IS A RECALL ON THE VEHICLE - VEH JUST STARTED TO CRANK UP AND SPRAK ON ITS OWN - EVERYONE CAME OUT - I NEED TO KNOW WHAT IS IT THAT FORD CAN DO TO HELP - CURRENTLY WE ARE STAYING WITH OUR SON BECAUSE VEH CAN NOT STAY AT HOME DUE TO THE SMOKE DAMAGE TO HOUSECRC ADVISED: I WILL FORWARD THIS INFORMATION TO THE FORD OGC DEPARTMENT. YOU WILL BE CONTACTED WITHIN 3-5 BUSINESS DAYS. - SEEKING TO HAVE FORD PLS LEAVE A MESSAGE ON CURST PHONE IF NOT REACHED BECAUSE THEY ARE NOT STAYING AT HOME AND ARE IN AND OUT -

MAY 16 2005

BEGINNING OF CONTACT
05/14/2005

VOICE OF THE CUSTOMER TRACKING SYSTEM

08.35.57

REGION: 21 ATLANTA OGC ISSUE CASE NBR: 0525001335
VIN: 1FTRW07W31K [REDACTED] ZONE: B2 OPENED: 05/13/2005
ENGINE: W VEH TYPE: T CLOSED: 05/13/2005

LAST NAME: [REDACTED] STATUS: CLOSED
TITLE: [REDACTED] FIRST NAME: [REDACTED] MI: [REDACTED]
ADDRESS: [REDACTED] STATE: SC ZIP: [REDACTED]
CITY: CAMDEN
HOME PHONE: [REDACTED]
MODEL YEAR: 2001 MODEL: F150 4X2 CREWCAB FLARESIDE
MILEAGE: 2
DEALER NAME: REDFEARN MOTOR COMP SALES CODE: F21277 P & A: 00925
REASON CODE: 0792 LEGAL - ACCIDENT / FIRE
SYMPTOMS: 801000 GENERAL INQUIRIES REQUEST/NON-VEHICLE RELATED

ORIGIN: CAC138 - US CONCERN CASE BASE COMMUNICATION: PHONE
ACTION: 705 - CONTACT ADVANCED TO OGC
DOCUMENT: ANALYST: MMARSH27 MARSHA MARSHALL

DATE: 05/13/2005 TIME: 14.34.59:
ACTION DATA/COMMENTS:

CUSTOMER SAID: - VEH CAUGHT ON FIRE ON SUNDAY - FIRE DEPT WA
S CALLED - FIRE REPORT RECIEVED - CONTACTED INSURANCE COMPAN
Y - INSURANCE COMPANY PULLED VEH FROM HOUSE AND DID AN INVES
TIGATION - FIRE DAMAGED HOME, BURNED TREES AND SHRUBS - LOTS
OF SMOKE DAMAGE - PAINTING NEEDS TO BE DONE AND WHOLE FRONT
WINDOW NEEDS TO COME OUT - I WANTED TO KNOW IF THERE IS A R
ECALL ON THE VEHICLECRC ADVISED: I WILL FORWARD THIS INFORMA
TION TO THE FORD OGC DEPARTMENT. YOU WILL BE CONTACTED WITHI
N 3-5 BUSINESS DAYS.



Allstate

NATIONAL PROPERTY SURRO
3800 ELECTRIC ROAD
SCARSDALE, NY 11750-4559

Write in good hands.



SHEILA HENDERSON
100 GARNAY DRIVE
SENeca SC 29678-2947

December 14, 2004 / Resent 2-1-05

INSURED: [REDACTED]
DATE OF LOSS: September 15, 2004
CLAIM NUMBER: [REDACTED]

PHONE NUMBER: [REDACTED]
FAX NUMBER: [REDACTED]
OFFICE HOURS:
Mon - Fri 8:00am - 5:30pm EST

Dear [REDACTED]

As you know, Allstate has paid you for damages that you incurred as a result of the above referenced loss. Currently, Allstate is attempting to recover the costs of the damages, along with your deductible. In order to pursue this matter further, I will need you to provide the following as well as fill out the enclosed questionnaire. Once filled out, please return to my attention in the enclosed prepaid postage envelope.

1. Attach a statement with a complete description of the incident, including events that occurred prior to and subsequent to the loss. *Insured last used at 4:00pm previous day - parked vehicle. Vehicle caught fire 3:00 in morning on loss date.*
2. Provide colored photos of the vehicle fire damage from several different angles.
3. Attach copies of the service history for the subject vehicle, including tune-ups or oil changes. *N/A. Regular service since purchase each year - Regular maintenance.*

We appreciate your cooperation on this matter. If you have any questions, feel free to contact me. Thank you.

Sincerely,

Bethany Martin

Bethany Martin
800-776-2615 Ext.823
Allstate Insurance Company

form;

Please answer the following in the space provided. If you need additional space, please use the back of the

9. What was the city and state of occurrence: Seneca SC
10. The 17 digit vehicle identification number: 1FT2X12L2VN [REDACTED]
11. What was the mileage at time of occurrence: 84630
12. What is the alleged defect:
Possible recall issue
13. Has the alleged defective part been repaired or replaced? (circle one) Yes or No
14. What is the current location of the vehicle, and the alleged defective part(s)?
Sold as salvage in Dec 2004
15. List all after market additions or modifications that were made to the vehicle:
None
16. Was the engine running? (circle one) Yes or No
17. Were the keys in the ignition? (circle one) Yes or No
18. Was this vehicle purchased new or used: used

If purchased used, provide the date of purchase, mileage at the time of purchase, and from whom the vehicle was purchased:

Purchase Date: '99
Purchased from Honda in Greenville, SC
Mileage - Approx 30,000 mileage
at time of purchase

A 02313 159 09 16 2004 1 0400357

Policy No. Date of Loss Date Reported

B Location

Street address: [Redacted] City: Saneca State: 159

C Incident Type Vehicle fire

E1 Date & Time Month: 09 Day: 16 Year: 2004 Hour: 02 Min: 34

E2 Units & Alarms Units: 0 Alarms: 0

E3 Special Services Fire: 0 Police: 0 EMS: 0

D Add Other or Related

1. Other (Specify) _____

2. Other (Specify) _____

3. Other (Specify) _____

4. Other (Specify) _____

5. Other (Specify) _____

F Actions Taken

Ext. Investigation

1. Fire Dept. (Specify) _____

2. Police Dept. (Specify) _____

3. Other (Specify) _____

G1 Resources

Apparatus: _____ Personnel: _____

G2 Multiple Damage Losses & Values

Property: 8,000

Contents: 1,000

Other: _____

Completed Modules

Fire-2 Structure-3 Utilities Fire-Cat-4 Fire Serv. Occupancy-4 ENO-4 Hazmat-7 Wildland Fire-8 Apparatus-4 Personnel-7 Areas-21

H1 W. Communities

Fire Service: _____

Police: _____

Other: _____

H2 Hazardous Materials Release

1. None

2. Natural gas flow leak, no explosion or threat of explosion

3. Flammable liquid or gas leak, no fire or threat of fire

4. Flammable liquid or gas leak, fire or threat of fire

5. Flammable solid or liquid, no fire or threat of fire

6. Flammable solid or liquid, fire or threat of fire

7. Corrosive liquid or solid, no fire or threat of fire

8. Corrosive liquid or solid, fire or threat of fire

9. Toxic gas, liquid or solid, no fire or threat of fire

10. Toxic gas, liquid or solid, fire or threat of fire

11. Other (Specify) _____

Mixed Use Property

1. Not listed

2. Assembly Use

3. Educational Use

4. Industrial Use

5. Institutional Use

6. Mercantile Use

7. Office Use

8. Residential Use

9. Retail Use

10. Storage Use

11. Utility Use

12. Other (Specify) _____

J Property Use

Structures

101 Church, place of worship

102 Restaurant or eat-in

103 Bar/night club, nightclub

104 Elementary school or kindergarten

105 High school or junior high

106 College, adult ed.

107 Care facility for the aged

108 Hospital

201 Office, white type infirmary

202 Doctor's office

203 Single or joint, not juvenile

204 1-2 family dwellings

205 Multi-family dwelling

206 Boarding house

207 Commercial hotel or motel

208 Residential hotel or motel

209 Dormitory, school

210 Food and beverage sales

301 Household goods, auto, repairs

302 Motor vehicle boat or airplane

303 Gas or service station

304 Business office

305 Electric generating plant

306 Laboratory/science lab

307 Manufacturing plant

308 Agricultural storage (barn)

309 Non-hazardous storage (garage)

310 Warehouse

Outside

401 Playground or park

402 Crop or orchard

403 Forest (timberland)

404 Outdoor storage area

405 Dump or sanitary landfill

406 Open land or field

501 Vacant lot

502 Graded/leveled for plot of land

503 Labor area, storage

504 Railroad right of way

505 Other street

506 Highway/divided highway

507 Residential street/highway

601 Construction site

602 Industrial plant yard

ENR-800-1-01-2491

K1: Allegedly Involved

Make/Model: [Redacted] Year: [Redacted]

Plate Number: [Redacted]

PO: 1987

Serial # [Redacted] Make/Model: [Redacted]

Post Office Box: [Redacted] City: [Redacted]

SE: 89679-11987

Check this box if not checked previously (NFI-1) or unknown.

K2: Owner

First or personal license? Yes No

Make/Model: [Redacted] Year: [Redacted]

Plate Number: [Redacted]

Mr., Mrs., Mr. First Name: [Redacted] Last Name: [Redacted]

Number: [Redacted] Make/Model: [Redacted]

Post Office Box: [Redacted] City: [Redacted]

State: [Redacted] Zip: [Redacted]

L: Remarks

Responded to Report of Vehicle Fire on Oakway Dr. Vehicle was well involved on arrival & fire extinguished. The fire there was no obvious cause of fire. The driver said his neighbor noticed the fire and alerted him. The heat from the fire damaged the vinyl siding on the end of the house. There were two other vehicles near the truck, they did not have any visible damage while enroute on scene.

Did Machine Fail?

Check all that apply and place an X in the additional box if not. Record on incident type as follows.

Engine No. 1-4 Engine No. 5-8

Fuel System Ignition

Electrical Brakes

Steering Suspension

Tires Windows

Other (Specify No. 100-104) Other (Specify No. 100-104)

ITEMS WITH ★ MUST ALWAYS BE COMPLETED

More remarks? Check this box and attach supplemental forms (10-12) as necessary.

M: Authorization

Order to this effect: [Redacted] Member: [Redacted] Agent: [Redacted]

Signature: [Redacted] Date: [Redacted]

Signature: [Redacted] Date: [Redacted]

EX-105-985-1C1-2492

<p>11. Structure Type ★</p> <p>Required for the purposes of building or a fire classification purposes.</p> <p>1 <input type="checkbox"/> Residential Single-Family Dwelling</p> <p>2 <input type="checkbox"/> Residential Multi-Family Dwelling</p> <p>3 <input type="checkbox"/> Open Structure</p> <p>4 <input type="checkbox"/> Air supported structure</p> <p>5 <input type="checkbox"/> Tent</p> <p>6 <input type="checkbox"/> Open Shell (e.g., dome)</p> <p>7 <input type="checkbox"/> Underground structure (check tunnel)</p> <p>8 <input type="checkbox"/> Confined structure (e.g., furnace)</p> <p>9 <input type="checkbox"/> Other type of structure</p>	<p>12. Building Status ★</p> <p>1 <input type="checkbox"/> Under construction</p> <p>2 <input type="checkbox"/> Occupied & operating</p> <p>3 <input type="checkbox"/> Idle, not regularly used</p> <p>4 <input type="checkbox"/> Under major renovation</p> <p>5 <input type="checkbox"/> Vacant but secured</p> <p>6 <input type="checkbox"/> Vacant and unsecured</p> <p>7 <input type="checkbox"/> Being demolished</p> <p>8 <input type="checkbox"/> Other</p> <p>9 <input type="checkbox"/> Undetermined</p>	<p>13. Building Height ★</p> <p>Total height of building at or above grade</p> <p>Total height of stories above grade</p>	<p>14. Main Floor Size ★</p> <p>NETR-3 Signature</p> <p>Total square feet</p> <p>Length in feet</p> <p>Width in feet</p>
---	---	--	---

<p>J1. Fire Origin ★</p> <p>1 <input type="checkbox"/> Single point</p> <p>2 <input type="checkbox"/> Other</p>	<p>J3. Number of Stories Damaged By Fire ★</p> <p>Count the floors or part of the depth of story</p> <p>Number of stories of minor damage (1 to 25% floor damage)</p> <p>Number of stories of moderate damage (25 to 40% floor damage)</p> <p>Number of stories of heavy damage (40 to 75% floor damage)</p> <p>Number of stories of total collapse (75 to 100% floor damage)</p>	<p>K. Material Contributing Most To Fire Spread</p> <p>1 <input type="checkbox"/> Other</p> <p>2 <input type="checkbox"/> Other</p> <p>3 <input type="checkbox"/> Other</p> <p>4 <input type="checkbox"/> Other</p> <p>5 <input type="checkbox"/> Other</p> <p>6 <input type="checkbox"/> Other</p> <p>7 <input type="checkbox"/> Other</p> <p>8 <input type="checkbox"/> Other</p> <p>9 <input type="checkbox"/> Other</p> <p>10 <input type="checkbox"/> Other</p>
<p>J2. Fire Spread ★</p> <p>1 <input type="checkbox"/> Confined to room of origin</p> <p>2 <input type="checkbox"/> Confined to floor of origin</p> <p>3 <input type="checkbox"/> Confined to building of origin</p> <p>4 <input type="checkbox"/> Beyond building of origin</p>		

<p>L1. Presence of Detectors ★</p> <p>Required for fire</p> <p>1 <input type="checkbox"/> None Present</p> <p>2 <input type="checkbox"/> Present</p> <p>3 <input type="checkbox"/> Undetermined</p>	<p>L3. Detector Power Supply</p> <p>1 <input type="checkbox"/> Battery only</p> <p>2 <input type="checkbox"/> Hardwire only</p> <p>3 <input type="checkbox"/> Plug in</p> <p>4 <input type="checkbox"/> Hardwire with battery</p> <p>5 <input type="checkbox"/> Plug in with battery</p> <p>6 <input type="checkbox"/> Mechanical</p> <p>7 <input type="checkbox"/> Multiple batteries & power supplies</p> <p>8 <input type="checkbox"/> Other</p> <p>9 <input type="checkbox"/> Undetermined</p>	<p>L4. Detector Effectiveness</p> <p>Required if detector present</p> <p>1 <input type="checkbox"/> Alarmed occupants, occupants responded</p> <p>2 <input type="checkbox"/> Occupants failed to respond</p> <p>3 <input type="checkbox"/> There were no occupants</p> <p>4 <input type="checkbox"/> Failed to alert occupants</p> <p>5 <input type="checkbox"/> Undetermined</p>
<p>L2. Detector Type</p> <p>1 <input type="checkbox"/> Smoke</p> <p>2 <input type="checkbox"/> Heat</p> <p>3 <input type="checkbox"/> Combination smoke-heat</p> <p>4 <input type="checkbox"/> Sprinkler, water flow detection</p> <p>5 <input type="checkbox"/> More than 1 type present</p> <p>6 <input type="checkbox"/> Other</p> <p>7 <input type="checkbox"/> Undetermined</p>	<p>L4. Detector Operation</p> <p>1 <input type="checkbox"/> Fire too small to activate</p> <p>2 <input type="checkbox"/> Guarded</p> <p>3 <input type="checkbox"/> Failed to operate</p> <p>4 <input type="checkbox"/> Undetermined</p>	<p>L5. Detector Failure Reason</p> <p>Required if detector failed to operate</p> <p>1 <input type="checkbox"/> Power failure, shorted or disconnected</p> <p>2 <input type="checkbox"/> Improper installation or placement</p> <p>3 <input type="checkbox"/> Defective</p> <p>4 <input type="checkbox"/> Lack of maintenance, includes cleaning</p> <p>5 <input type="checkbox"/> Battery missing or disconnected</p> <p>6 <input type="checkbox"/> Battery discharged or dead</p> <p>7 <input type="checkbox"/> Other</p> <p>8 <input type="checkbox"/> Undetermined</p>

<p>M1. Presence of Automatic Extinguishment System ★</p> <p>1 <input type="checkbox"/> None Present</p> <p>2 <input type="checkbox"/> Present</p>	<p>M2. Automatic Extinguishment System Operation</p> <p>Required if present</p> <p>1 <input type="checkbox"/> Operated & effective in extinguishing fire</p> <p>2 <input type="checkbox"/> Operated & not effective in extinguishing fire</p> <p>3 <input type="checkbox"/> Fire too small to activate</p> <p>4 <input type="checkbox"/> Failed to operate, system</p> <p>5 <input type="checkbox"/> Other</p> <p>6 <input type="checkbox"/> Undetermined</p>	<p>M3. Automatic Extinguishment System Failure Reason</p> <p>Required if present</p> <p>1 <input type="checkbox"/> System shut off</p> <p>2 <input type="checkbox"/> Not enough agent discharged</p> <p>3 <input type="checkbox"/> Agent discharged but did not reach fire</p> <p>4 <input type="checkbox"/> Wrong type of system</p> <p>5 <input type="checkbox"/> Fire not in area protected</p> <p>6 <input type="checkbox"/> System components damaged</p> <p>7 <input type="checkbox"/> Lack of maintenance</p> <p>8 <input type="checkbox"/> Manual intervention</p> <p>9 <input type="checkbox"/> Other</p> <p>10 <input type="checkbox"/> Undetermined</p>
<p>M2. Type of Automatic Extinguishment System</p> <p>Required if present</p> <p>1 <input type="checkbox"/> Wet pipe sprinkler</p> <p>2 <input type="checkbox"/> Dry pipe sprinkler</p> <p>3 <input type="checkbox"/> Other sprinkler system</p> <p>4 <input type="checkbox"/> Dry chemical system</p> <p>5 <input type="checkbox"/> Foam system</p> <p>6 <input type="checkbox"/> Halogen type system</p> <p>7 <input type="checkbox"/> Carbon dioxide (CO2) system</p> <p>8 <input type="checkbox"/> Other special hazard system</p> <p>9 <input type="checkbox"/> Undetermined</p>	<p>M4. Number of Sprinkler Heads Operating</p> <p>Required if system operated</p> <p>Number of heads that operated</p>	

FD-905 (REV. 11-1-2003)

A 87313 156 09/16/2004 7 0400357 001

Policy No. 156 Date of Loss 09/16/2004 Alarm No. 7 Claim No. 0400357 Report No. 001

B Location

Address [REDACTED] City SEWER State IL Zip [REDACTED]

Location Description [REDACTED]

C Incident Type 131 VEH FIRE

E1 Date & Time Month 09 Year 2004 Day 16 Hour 02 Minute 34

E2 Party & Alarm 131 VEH FIRE

E3 Special Details [REDACTED]

F Actions Taken

17 Evacuate visit

92 STAND BY

16 Provide water

G1 Damages

G2 Estimated Dollar Losses & Values

Property [REDACTED]

PRE-INCIDENT VALUE [REDACTED]

Completed Modules

H1 Occupant Injuries

H2 Occupant Damage

H3 Hazardous Materials Release

Mixed Use Priority

J Property Use

Structure

Outside

Other

Water

Gas

Other

EN05-005-1-01-2004

	Repl. Cost	Depr.	ACV OF RD
Exterior Total	\$157.16	\$0.00	\$157.16
AA - Dwelling Totals	\$991.94	\$3.79	\$988.15

Summary

	Repl. Cost	Depr.	ACV
Estimate Totals	\$991.94	\$3.79	\$988.15
Less Amount Not Subject To Overhead & Profit	-\$415.87	\$0.00	-\$415.87
Amount Subject To Overhead & Profit	\$576.07	\$3.79	\$572.28
Contractor's Overhead & Profit (24%)	\$138.26	\$0.91	\$137.35
Sub-Total	\$714.33	\$4.70	\$709.63
Amount Not Subject To Overhead & Profit	-\$415.87	\$0.00	-\$415.87
Total With Overhead & Profit	\$1,130.20	\$4.70	\$1,125.50
Sales Tax 6.00%	\$17.96	\$0.11	\$17.85
Total With Tax	\$1,148.16	\$4.81	\$1,143.35
Less Deductible Applied (\$250.00 Maximum)	-\$250.00		-\$250.00
Net Claim	\$898.16	\$4.81	\$888.35

Items noted as such by the Price Database Legend at the bottom of this estimate were based on material pricing provided by Home Depot. These items should be available at your local Home Depot store and reflect prices which are generally available in your local market. It should be noted that Home Depot Pricing can change without notice. Allstate will honor this estimate and work with you to resolve your claim regardless of where you purchase your materials and services. If you find the cost of repairs or replacement is more than reflected in this estimate, please contact your claim adjuster at the number listed above.

Price Database Legend

- a = MSH Cost Data 2004-01
- b = MSH Cost Data 2004-01 (Home Depot Material)

- w = Write-in
- * = Modified

EPRD-005-LC1-2405

A 523131 SC 07 11/29/04 04.00357 L10

Apparatus or Resource: **1** to **1** **11** Type: **111**

Dispatch Arrival Clear:

Personnel:

Personnel ID	Name	Rank or Grade	Ahead	Action Taken	Action Taken	Action Taken	Action Taken
0846	Walker Lee	FF	<input checked="" type="checkbox"/>	11			
0823	Bobby Brown	Lt	<input checked="" type="checkbox"/>	11			
0838	Wendell Gibbs	Vol	<input checked="" type="checkbox"/>	11			

Dispatch Arrival Clear:

Personnel:

Personnel ID	Name	Rank or Grade	Ahead	Action Taken	Action Taken	Action Taken	Action Taken
0476	Joan Lamm	FF	<input checked="" type="checkbox"/>	92			
0627	Jak Oliver	Sgt	<input checked="" type="checkbox"/>	92			

Dispatch Arrival Clear:

Personnel:

Personnel ID	Name	Rank or Grade	Ahead	Action Taken	Action Taken	Action Taken	Action Taken
			<input type="checkbox"/>				
			<input type="checkbox"/>				
			<input type="checkbox"/>				
			<input type="checkbox"/>				
			<input type="checkbox"/>				
			<input type="checkbox"/>				

ENR-005-LC1-2405

A Complete this side for all fires

Fire
 Explosion
 Other

City: Chicago State: IL ZIP: 60611
 Address: 154 W. 17th St

B Property Details

B1: 1 Not insured
 B2: 1 Insurance not reported
 B3: 1 None Loss item was new

C On-Site Investigation or Photos

1 Bulk storage or warehousing
 2 Flammable or combustible liquids
 3 Flammable gases for sale
 4 Flammable solids

1 Bulk storage or warehousing
 2 Flammable or combustible liquids
 3 Flammable gases for sale
 4 Flammable solids

1 Bulk storage or warehousing
 2 Flammable or combustible liquids
 3 Flammable gases for sale
 4 Flammable solids

D Ignition

D1: U/I Undetermined
 D2: U/I Undetermined
 D3: U/I Undetermined
 D4: U/I Undetermined

E1 Cause of Ignition

Ignition caused by an explosive agent
 1 Intentional
 2 Unintentional
 3 Failure of equipment or heat source
 4 Act of nature
 5 Cause not ascertained
 6 Cause not ascertained - Under investigation

E2 Factors Contributing To Ignition

None
 Poor maintenance of equipment
 Poor housekeeping in location

E3 Human Factors Contributing To Ignition

None
 1 Asleep
 2 Possibly impaired by alcohol or drugs
 3 Unintentional panic or fright
 4 Possibly mentally disabled
 5 Physically disabled
 6 Multiple persons involved
 7 Age wear or illness
 Estimated age of person involved:
 1 Male 2 Female

F1 Equipment Involved in Ignition

None → If equipment not identified, refer to Section 12
 Equipment label:
 Brand:
 Model:
 Label:
 Year:

F2 Equipment Power

Equipment Power Source:

F3 Equipment Portability

1 Portable
 2 Stationary
 Portable: Check this category only if covered by your policy. It does not apply to mobile homes, and excludes all tools and tools.

G Fire Suppression Factors

None
 Refer to the back cover.
 Fire suppression system (1):
 Fire suppression system (2):
 Fire suppression system (3):

H1 Mobile Property Involved

None
 1 Not involved in ignition, but damaged
 2 Involved in ignition, but did not burn
 3 Involved in ignition and burned

H2 Mobile Property - Type & Make

VIA Personal Veh (P260)
IEO Ford
154 W. 17th St
154 W. 17th St

Check Use:

Pre-Fire Plan Available
 Fire report attached
 Police report attached
 Carrier report attached
 Other reports attached

Fire Number: Date: 11/29/04 ZIP Number:

ENR5-005-1C1-2487

NOV. 29. 2004 11:08AM

ALLSTATE SUBROGATION

NO. 636 P. 1



Allstate

NATIONAL PROPERTY SURETY
3800 ELECTRIC ROAD
ACAPULCO, VA 20610-4500

What's in good hands.

|||||
FORD MOTOR CO ATTN SHAWN HORTON
3 PARKLANE BLVD 300
DEARBORN MI 48126-2506

RECEIVED NOV 30 2004

November 29, 2004

OUR INSURED
ADDRESS:
SENeca, SC

CLAIM NUMBER:
LOSS DATE: September 15, 2004
AMOUNT OF LOSS: \$1398.16

Please accept this letter as notice of our intent to pursue our subrogation rights. Subrogation is an insurance carrier's right to recover payment from a party, other than the named insured, that is responsible for causing the loss.

Our investigation has determined that on the above date our insured's property sustained damage as result of your actions which are detailed below.

CAUSE OF LOSS: 1997 Ford F150 Truck caught fire causing fire damage to Allstate insured property. Truck caught on fire due to electrical.

To assist you in processing your claim, we have included the information as indicated.

- Damage Estimate Checks
- Fire/ Police Report

Upon review of the attached information, please forward payment for the above loss amount to: Allstate Payment Processing Center, P.O. Box 227257, Dallas, TX 75222. Please include our claim number on your payment.

Thank you for your cooperation and immediate attention to this request.

Sincerely,

Bethany Martin

Bethany Martin
800-776-2615 Ext 823
Allstate Insurance Company



All Action Details for Issue

Print

VIN: 1FTRE182227 [REDACTED] Year: 2002 Model: F-SERIES Case: 517843143
 Name: [REDACTED] Owner Status: Original WSD: 2002-07-18
 Symptom Desc: FIRE/SMOKE VISIBLE FLAME Primary Phone: [REDACTED]
 Reason Desc: LEGAL - FIRE CLAIM Secondary Phone: [REDACTED]
 Issue Type: 07 LEGAL Issue Status: CLOSED

Action: OPEN LEGAL CONTACT - PRODUCT LIABILITY
 Dealer: 02185 RICART FORD INC Origin Desc: CA-LITIGATION PREVENTION-FRONT DESK
 Odometer: 5 MI Comm Type: EMAIL
 Analyst Name: LEICH, CHERIE Analyst: GLEICH
 Action Date: 11/10/2003 Action Time: 14.23.04.533 Action Data: No

Comments: PRODUCT LIABILITY EMAIL RECEIVED 11-07-03. DEALER CONTACT: LYNNE DEWITT.
 CUSTOMER ALLEGES HER VEHICLE CAUGHT FIRE. CUSTOMER REQUESTS CONTACT FROM FORD REPRESENTATIVE.

Action: MAKE OUTBOUND CALL TO DEALER
 Dealer: 02185 RICART FORD INC Origin Desc: CONSUMER AFFAIRS - LITIGATION PREVENTION
 Odometer: 5 MI Comm Type: PHONE
 Analyst Name: GRAHAM, ROCHELLE Analyst: RGRAHA41
 Action Date: 11/11/2003 Action Time: 11.12.41.896 Action Data: Yes

Comments: CONTACTED LYNN AT DEALERSHIP REGARDING DEALER REQUEST FORM RECEIVED. ADVISED NOTIFICATION WAS
 SENT BY CUSTOMER'S INSURANCE CARRIER ADVISING THEIR RIGHT TO SUBROGATE... UNSUCCESSFUL ATTEMPTS WERE MADE
 TO SET UP AN INSPECTION BY FIELD CSM. NO RECALLS FOR VIN...NO RELATED REPAIR HISTORY.

Data Element Name	Data Value
CONTACT PERSON	LYNN

Action: REFER TO INSURANCE CARRIER - INSURANCE COMPANY ALREADY INVOLVED
 Dealer: 02185 RICART FORD INC Origin Desc: CONSUMER AFFAIRS - LITIGATION PREVENTION
 Odometer: 5 MI Comm Type: MAIL
 Analyst Name: GRAHAM, ROCHELLE Analyst: RGRAHA41
 Action Date: 11/17/2003 Action Time: 16.55.21.890 Action Data: No

Comments: NO RECALLS FOR VIN...NO RELATED REPAIR ORDERS. SENT 'INSURANCE COMPANY ALREADY INVOLVED' LETTER TO
 CUSTOMER.

E903-005-1C1-2499

IN THE COURT OF COMMON PLEAS
ROSS COUNTY, OHIO

[REDACTED]
Kingston, Ohio [REDACTED]

and

Lightning Rod Mutual Insurance Co.

Plaintiffs

v.

Ford Motor Company
Parkland Towers West
Suite 300
Three Parkland Blvd.
Dearborn, MI 48126-2568

and

John Does (1-5)
Names and addresses unknown

Defendants.

Case No. 04-03671

Judge HOLMES

COMPLAINT FOR MONEY
DAMAGES
(DISCOVERY ATTACHED)

ROSS COUNTY COURT OF COMMON PLEAS
2004 NOV 18 PM 2:37

COURT OF COMMON PLEAS

1. Plaintiff Lightning Rod Mutual Insurance Company insured Plaintiff [REDACTED] by means of an automobile insurance policy that provided coverage for damage to a 2002 Ford F-150, VTN 1FTRF18222N [REDACTED]

2. The 2002 Ford F-150 was a new vehicle when plaintiff [REDACTED] bought it on July 18, 2002. At all times, plaintiff [REDACTED] used the vehicle in its ordinary and/or intended manner.

3. On October 10, 2003, Plaintiff [REDACTED] was driving his Ford F-150 home from work when the headlights repeatedly turned off and then on again. The next time he drove the vehicle, October 13, 2003, the headlights malfunctioned again. On October 13, 2003, plaintiff [REDACTED] Huffer parked his Ford F-150 off the side of the driveway to his home. Shortly thereafter, plaintiff [REDACTED] saw smoke coming out of the cab of the Ford F-150 and flames inside the cab. A fire had broken out at or around the left front cab, left rear engine compartment.

4. The fire caused property damage to the vehicle, all which was reasonably valued at \$30,100.00.

5. Pursuant to the policy of insurance, plaintiff Lightning Rod Mutual Insurance Company paid the sum of \$30,100.00 to or on behalf of its insured and thereby became subrogated in that amount.

COUNT ONE

6. The allegations contained in the preceding paragraphs are hereby restated.

7. The left rear engine compartment is a product within the meaning of Ohio's Product Liability Act.

8. The malfunction in the left rear engine compartment constitutes a manufacturing and/or design and/or failure to warn product defect as those terms are used in Ohio's Product Liability Act.

9. Defendant Ford Motor Company is a manufacturer of the left rear engine compartment within the meaning of Ohio's Product Liability Act.

10. The product defect proximately caused plaintiffs' damages.

COUNT TWO

11. The allegations contained in the preceding paragraphs are hereby restated.

12. Defendant Ford Motor Company was negligent in designing, manufacturing, inspecting, testing, and/or providing sufficient consumer instructions and warnings as to the Ford F-150's left rear engine compartment.

13. As a direct and proximate result of defendant Ford Motor Company's negligence, plaintiffs sustained the aforementioned damages.

COUNT THREE

14. The allegations contained in the preceding paragraphs are hereby restated.

15. The Ford F-150 was covered under the terms of an express warranty that was part of plaintiff Melvin Huffer's contract of purchase of the automobile.

16. Additionally, the Ford Motor Company automobile was subject to implied warranties of merchantability and fitness for a particular purpose.

17. Further, the Ford Motor Company automobile was subject to the specific warranties set forth in the federal Magnuson-Moss Warranty Act, as Ford Motor Company is a supplier of consumer goods and engaged in making a consumer product directly available to plaintiff Melvin Huffer.

18. Defendant Ford Motor Company breached the aforementioned warranties in that the Ford F-150 was not free from defects, rendering the automobile unmerchantable, unreliable and/or unsafe and not suitable for the uses for which the product was intended.

COUNT FOUR

19. The allegations contained in the preceding paragraphs are hereby restated.

20. Defendants John Does (1-5), whose true names and addresses are presently unknown despite reasonable attempts to ascertain same, are manufacturers and/or suppliers of the Ford F-150 and/or its component parts, and/or are persons otherwise liable by reason of negligence, vicarious liability, indemnification, contractual obligation, operation of law, or other theories of liability.

21. As a direct and proximate result of the defendants John Does' product defect, negligence, or other basis of liability, plaintiffs sustained the aforementioned damages.

WHEREFORE, Plaintiffs pray for compensatory damages against all defendants, jointly and severally, in the minimum amount of \$30,100.00 plus interest, costs, and attorney fees.

Respectfully submitted.

Thomas J. Vozar (#37417)
VOZAR, ROBERTS & MATEJCZYK
3505 East Royalton Road, Suite 100
Cleveland, Ohio 44147
440-746-0911 440-746-0922 (fax)
Attorney for Plaintiffs

ISSUE LIST

**Last Handling Date/
Issue Status**
11/17/2003
CLOSED

**Name/
Reason Desc**

[REDACTED]
LEGAL - FIRE CLAIM

**Vin/
Case No.**
1FTRF18222 [REDACTED]
517843143

Model Year and Vehicle Line
2002 F-SERIES

Issue Type
07

ENR-001-L01-2494

[REDACTED]

=ALL&IssViewType=ALL

12/2/2004

All Action Details for issue

Print

VIN: 1ETRE18222N [REDACTED] Year: 2002 Model: F-SERIES Case: 517843143
 Name: [REDACTED] Owner Status: Original WSD: 2002-07-18
 Symptom Desc: FIRE/SMOKE VISIBLE FLAME Primary Phone: [REDACTED]
 Reason Desc: LEGAL - FIRE CLAIM Secondary Phone: [REDACTED]
 Issue Type: 07 LEGAL Issue Status: CLOSED

Action: OPEN LEGAL CONTACT - PRODUCT LIABILITY Origin Desc: CONSUMER AFFAIRS - LITIGATION PREVENTION-FD
 Dealer: 02185 RICART FORD, INC. Odometer: 5 MI Comm Type: EMAIL
 Analyst Name: LEICH,CHERIE Analyst: CLEICH
 Action Date: 11/10/2003 Action Time: 14.23.04.533 Action Date: No

Comments *****PRODUCT LIABILITY***** EMAIL RECEIVED 11-07-03. DEALER CONTACT: LYNNE DEWITT. CUSTOMER ALLEGES HER VEHICLE CAUGHT FIRE. CUSTOMER REQUESTS CONTACT FROM FORD REPRESENTATIVE.

Action: MAKE OUTBOUND CALL TO DEALER Origin Desc: CONSUMER AFFAIRS - LITIGATION PREVENTION
 Dealer: 02185 RICART FORD, INC. Odometer: 5 MI Comm Type: PHONE
 Analyst Name: GRAHAM, ROCHELLE Analyst: RGRAHA41
 Action Date: 11/11/2003 Action Time: 11.12.41.896 Action Date: Yes

Comments CONTACTED LYNN AT DEALERSHIP REGARDING DEALER REQUEST FORM RECEIVED. ADVISED NOTIFICATION WAS SENT BY CUSTOMER'S INSURANCE CARRIER ADVISING THEIR RIGHT TO SUBROGATE... UNSUCCESSFUL ATTEMPTS WERE MADE TO SET UP AN INSPECTION BY FIELD CSM. NO RECALLS FOR VIN...NO RELATED REPAIR HISTORY.

<u>Data Element Name</u>	<u>Data Value</u>
CONTACT PERSON	LYNN

Action: REFER TO INSURANCE CARRIER - INSURANCE COMPANY ALREADY INVOLVED Origin Desc: CONSUMER AFFAIRS - LITIGATION PREVENTION
 Dealer: 02185 RICART FORD, INC. Odometer: 5 MI Comm Type: MAIL
 Analyst Name: GRAHAM, ROCHELLE Analyst: RGRAHA41
 Action Date: 11/17/2003 Action Time: 16.55.21.690 Action Date: No

Comments NO RECALLS FOR VIN...NO RELATED REPAIR ORDERS. SENT 'INSURANCE COMPANY ALREADY INVOLVED' LETTER TO CUSTOMER.

EP005-005-LC1-2499

EA99-000-L01-2100



MAY 27 2005



Wednesday, April 27, 2005

FORD MOTOR COMPANY
PARKLAND TOWERS WEST #300
3 PARKLANE BLVD.
DEARBORN, MI 48126

FORD MOTOR COMPANY
RECEIVED
MAY 27 2005
OFFICE OF THE
GENERAL COUNSEL

Re: **PRODUCT DEFECT CAUSED VEHICLE FIRE AND RESULTING DAMAGES.**

VIN: 1FTRX17L01N [REDACTED]

Year: 2001

Make: FORD

Model: F-150

Our Insured: [REDACTED]

Address: [REDACTED], SAINT PETERSBURG, FL [REDACTED]

Phone No.: [REDACTED]

Our Claim No: [REDACTED]

Date of Loss: 4-9-05

Damages: \$ 14,680.64

NOTICE OF SUBROGATION CLAIM

Please accept this letter as formal notice of our subrogation rights in regard to the above-captioned claim. Demand is hereby made upon you for payment of Progressive's damages and those of Progressive's insured.

Our investigation indicates damages to our insured's vehicle was a direct result of a manufacturer's defect or negligence on your behalf. Enclosed please find all supporting documentation.

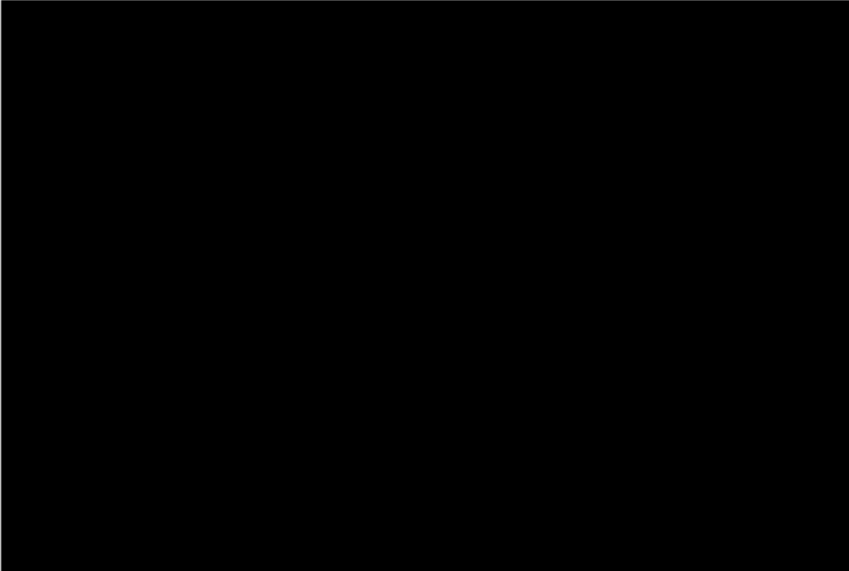
Please acknowledge receipt of my subrogation demand and forward your payment of \$14,680.64 to my attention, payable to "Progressive Express Insurance Company, as subrogee of RAINBOW CONCRETE & MASO", and mail to my attention at [REDACTED] Richmond Hts., OH [REDACTED]

You can contact me at the number listed below should you need additional documentation or care to discuss this claim.

Thank you for your anticipated cooperation.

Progressive Express Insurance Company

William P. Kienzl
Subrogation Representative
(440) 603-7967





Claims Processing Center

P.O. Box 1779

Columbia, SC 29202

Tel: 800.748.2030

Fax: 877.858.8920

January 28, 2005

[REDACTED]
Ormond Beach, FL [REDACTED]

RE:

Insured: Same
Policy Number: [REDACTED]
Claim Number: [REDACTED]
Insured Location: Same as above
Date of Loss: January 10, 2005

Dear Insured :

Enclosed are checks in the amount of \$2,208.80 (building) and \$2,320.16 (Other Structures) along with a copy of the related estimates completed by INS of Orlando. Should you have any questions with regards to the estimates, please call them at 1-800-810-3572. This check represents payment for Fire claim.

The replacement cost benefit available to you for your building damage, based on the repair estimates is \$112.79 and your other structures is \$114.13 which is non-recoverable. To receive the additional payment on a replacement cost basis, you must complete the actual repair or replacement of the damaged property within 180 days after the date of loss and notify us after the work has been completed. To make claim for these benefits, you must provide documentation of completed repair of the building or a signed contract from a repair firm. With regards to the personal property, you must provide copies of receipts showing replacement of the items on the inventory sheet.

In accordance with the policy conditions, we have included your mortgage holder on the settlement check. If you have questions regarding the processing of this check, please contact your mortgage company for their procedures.

We have completed our evaluation of your claim and paid for all damages we believe are covered under the policy. Please contact me if you have any questions about your claim.

Sincerely,

Jody Speagle
Claims Examiner

*Any person who knowingly and with intent to injure, defraud, or deceive any Insurer files a statement of claim or an application containing any false, incomplete, or misleading information is guilty of a felony of the third degree. The changes in this paragraph relating to applications shall take effect on March 1, 1996.

Quality • Integrity • Pride

ER05-005-LC1-2488



725 Primera Blvd. Suite 115
Lake Mary, FL 32746

407-583-0225
TOLL FREE 800-810-3572
FAX 800-810-3573

January 20, 2005

St. Johns Insurance Company
5950 Hazeltine National Drive Suite 650
Orlando, Florida
32822

Attn.:

RE: Insured: [REDACTED]
Claim #: [REDACTED]
Policy #: [REDACTED]
Type of Loss: Fire
D.O.L: 1/10/05
Loss Location: [REDACTED]
INS File #: 1114-1662

Final Report

Assignment: Date Received: 1/10/05
Date Contacted: 1/10/05
Date Inspected: 1/18/05

Enclosures:

Photos, Estimate, ITV

Cause and Origin of Loss:

Upon our inspection we confirmed that the Date of Loss was 1/10/05. The insured stated that the cause of the loss was the Ford F-150 that was parked in the driveway. The vehicle caught fire as a result of faulty wiring. The insured is currently represented by an attorney in a class action suit against Ford Motor Division.

ERR5-805-LC1-2400

Adjustment:

Scope of Damage:

At the time of our inspection we prepared a detailed scope of the damages resulting from the fire. The insured was in our presence at the time of our inspection and agreed with our scope. As can be seen in our attached estimate, we have included the operations to replace the damaged soffit, fascia, garage door and trim. These damages fall under the section of the policy labeled Coverage A. This section carries a limit of liability of \$315,000. We also found damages to the concrete driveway located directly under the damaged vehicle. The section of concrete slab will need to be replaced as the damages are unreparable. The dwelling was built in 2004 therefore a small amount of depreciation was applied.

Breakdown of Adjustment is as follows:

	<i>RC</i>	<i>Depreciation</i>	<i>ACV</i>	<i>Deductible</i>	<i>Net Claim</i>
Dwelling	\$3,321.59	\$112.79	\$3,208.80	\$1,000.00	\$2,208.80
Unattached	\$2,434.29	\$114.13	\$2,320.16		\$2,320.16
Total	\$5,755.88	\$226.92	\$5,528.96	\$1,000.00	\$4,528.96

Payment Recommendations:

If our estimate meets with your approval, we suggest that payment be issued as follows:

<i>Item</i>	<i>Payee(s)</i>	<i>Amount</i>
Dwelling		\$4,528.96
Contents		

Thank you for this assignment.

INSURANCE NETWORK SERVICES, INC.

Sr. Adjuster
Johann Bowman, AIC

E-Mail: Yobowman1976@yahoo.com

Cell Phone: 904 249 2997

01/10/2005 15:12

9846783564

CRASH REPORT

00012

PL

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2005

894

DE-0000150

000

B Location*

Street address

Intersection

To front of

Rear of

Adjacent to

Directions

Diamond Beach

C Incident Type *

131 Passenger vehicle slip

D Aid given or Received?

1 Mutual aid received

2 Automatic aid given

3 Mutual aid given

4 Automatic aid given

5 Other aid given

6 None

E1 Date & Times

Month Day Year Hr Min Sec

01 10 2005 03:37:47

01 10 2005 03:49:00

01 10 2005 03:55:57

01 10 2005 04:48:12

E2 Knife & Alarms

10 01 94

Special Studies

F Actions Taken *

21 Notifying

22 Ventilate

23 Investigate

G1 Resources *

Suppression 0003 0000

0000 0000

G2 Estimated Dollar Losses & Values

Property \$ 007,500

Contents \$ 000,000

Property \$ 007,500

Contents \$ 000,000

H1 Casualties

None

H2 Hazardous Materials Released

None

I Mixed Use Property

None

J Property Use Structures

131 Church, place of worship

161 Restaurant or cafe/bar

162 Bar/Screen or nightclub

215 Elementary school or kindergarten

216 High school or junior high

241 College, adult education

311 Care facility for the aged

321 Hospital

Outside

124 Playground or park

635 Crops or orchard

669 Forest (stand)

807 Outdoor storage area

919 Dump or sanitary landfill

931 Open lots or fields

341 Clinic, clinic type infirmary

342 Doctor/dentist office

381 Prison or jail, not juvenile

419 1-or 2-family dwelling

429 Multi-family dwelling

439 Sewing/laundry house

449 Commercial hotel or motel

459 Restaurant, board and care

464 Dormitory/hallways

519 Food and beverage sales

936 Vacant lot

938 Meadow/park for plot of land

945 Lake, river, stream

951 Allocated right of way

960 Other street

961 Highway/divided highway

962 Residential street/avenue

539 Household goods, sales, repair

579 Motor vehicles/boat sales/repair

571 Gas or service station

599 Business office

616 Electric generating plant

629 Laboratory/science lab

700 Manufacturing plant

818 Inventory/poultry storage(horn)

822 Non-residential parking garage

831 Warehouse

981 Construction site

984 Industrial plant yard

Property Tax 352

Accidental street, road or

Highway, Division 03/21/98

01/18/2005 15:12

9046783564

GRAND BEACH F D

PAGE 06

Dispatch Call
 Other Personal
 08012 [FL] 1 10 2005 894 05-0000150 000

Apparatus or Resource <small>Use codes listed below</small>	Date and Times <small>Check if same as class date</small>			Sent <input checked="" type="checkbox"/>	Number of People	Use <small>Check ONE use for each apparatus or resource. If multiple use at the incident.</small>	Actions Taken <small>List up to 4 actions. For each apparatus, list up to 4 actions.</small>	
	Month	Day	Hour/Min					
1 ID 08-93 Type 11	Dispatch	1	10	2005	03:37	<input checked="" type="checkbox"/> Suppression <input type="checkbox"/> Res <input type="checkbox"/> Other		
	Arrival							
	Clear							

Personnel ID	Name	Rank or Grade	Attended <input checked="" type="checkbox"/>	Action Taken	Action Taken	Action Taken	Action Taken
1571	Davis, Carrie	FFP	X				
3240	King, David	CFP	X				
4237	Quarter, Nathan	DEP	X				

2 ID 08-84 Type 11	Dispatch	1	10	2005	03:37	<input checked="" type="checkbox"/> Suppression <input type="checkbox"/> Res <input type="checkbox"/> Other		
	Arrival	1	10	2005	03:40			
	Clear	1	10	2005	04:49			

Personnel ID	Name	Rank or Grade	Attended <input checked="" type="checkbox"/>	Action Taken	Action Taken	Action Taken	Action Taken
5009	Johnson, William	CFP	X				
3600	King, Travis	FFP	X				
9289	Dunn, Gerald	DCP	X				

3 ID 08-82 Type 11	Dispatch	1	10	2005	03:37	<input checked="" type="checkbox"/> Suppression <input type="checkbox"/> Res <input type="checkbox"/> Other		
	Arrival	1	10	2005	03:52			
	Clear	1	10	2005	04:38			

Personnel ID	Name	Rank or Grade	Attended <input checked="" type="checkbox"/>	Action Taken	Action Taken	Action Taken	Action Taken
4758	Kelly, Dale	NFE	X				
6952	Marasowski, William	FFP	X				
7502	McTeeny, Matthew	CFP	X				

01/18/2005 15:12 9048763564

CRIMINAL BEACH F D

PAGE 02

Call
 Dispatch
 Apparatus or Resource

Apparatus or Resource	Date and Time				Sent	Number of People	Use	Actions Taken	
	Month	Day	Year	Hour:Min					
1 in <u>EX-02</u> Type <u>11</u>	Dispatch <input checked="" type="checkbox"/>	1	10	2005	03:37	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/> Suppression <input type="checkbox"/> EMS <input type="checkbox"/> Other	<input type="checkbox"/>	<input type="checkbox"/>
2 in <u>EX-04</u> Type <u>11</u>	Dispatch <input checked="" type="checkbox"/>	1	10	2005	03:37	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/> Suppression <input type="checkbox"/> EMS <input type="checkbox"/> Other	<input type="checkbox"/>	<input type="checkbox"/>
3 in <u>EX-02</u> Type <u>11</u>	Dispatch <input checked="" type="checkbox"/>	1	10	2005	03:37	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/> Suppression <input type="checkbox"/> EMS <input type="checkbox"/> Other	<input type="checkbox"/>	<input type="checkbox"/>
4 in <u></u> Type <u></u>	Dispatch <input type="checkbox"/>					<input type="checkbox"/>	<input type="checkbox"/> Suppression <input type="checkbox"/> EMS <input type="checkbox"/> Other	<input type="checkbox"/>	<input type="checkbox"/>
5 in <u></u> Type <u></u>	Dispatch <input type="checkbox"/>					<input type="checkbox"/>	<input type="checkbox"/> Suppression <input type="checkbox"/> EMS <input type="checkbox"/> Other	<input type="checkbox"/>	<input type="checkbox"/>
6 in <u></u> Type <u></u>	Dispatch <input type="checkbox"/>					<input type="checkbox"/>	<input type="checkbox"/> Suppression <input type="checkbox"/> EMS <input type="checkbox"/> Other	<input type="checkbox"/>	<input type="checkbox"/>
7 in <u></u> Type <u></u>	Dispatch <input type="checkbox"/>					<input type="checkbox"/>	<input type="checkbox"/> Suppression <input type="checkbox"/> EMS <input type="checkbox"/> Other	<input type="checkbox"/>	<input type="checkbox"/>
8 in <u></u> Type <u></u>	Dispatch <input type="checkbox"/>					<input type="checkbox"/>	<input type="checkbox"/> Suppression <input type="checkbox"/> EMS <input type="checkbox"/> Other	<input type="checkbox"/>	<input type="checkbox"/>
9 in <u></u> Type <u></u>	Dispatch <input type="checkbox"/>					<input type="checkbox"/>	<input type="checkbox"/> Suppression <input type="checkbox"/> EMS <input type="checkbox"/> Other	<input type="checkbox"/>	<input type="checkbox"/>

- Type of Apparatus or Resources**
- Ground Fire Suppression**
- 11 Engine
 - 12 Truck or aerial
 - 13 unit
 - 14 Tanker & pump combination
 - 15 brush truck
 - 17 AWP (Aircraft rescue and firefighting)
 - 18 Ground fire suppression, other
- Heavy Ground Equipment**
- 21 Tower or pole
 - 22 tractor
 - 24 Tractor or loader
 - 28 Heavy equipment, other
- AIRCRAFT**
- 41 Aircraft: fixed wing, tanker
 - 42 Helicopter
 - 43 Helicopter
 - 44 Aircraft, other

- Marine Equipment**
- 31 Fire boat with pump
 - 32 Boat, no pump
 - 33 Marine apparatus, other
- Support Equipment**
- 45 Breathing apparatus support
 - 46 Light and air unit
 - 49 Support apparatus, other
- Medical & Rescue**
- 71 Stretcher unit
 - 72 Urban search & rescue unit
 - 73 High angle rescue unit
 - 74 ALS unit
 - 75 ALS unit
 - 76 Medical and rescue unit, other

More Apparatus?
Use Additional sheets

- Other**
- 51 Mobile command post
 - 52 Chief officer car
 - 53 Marine unit
 - 54 Type 1 hand crew
 - 55 Type 2 hand crew
 - 58 Privately owned vehicles
 - 60 Other apparatus/resources
 - 99 None
 - 00 Undetermined

WPIS-9 Revision 11/17/00

01/16/2005 15:12 0046763564
 08012 01 10 2005 824 06-000190 000
 DATE TIME DAY/MON/YEAR HOUR MIN SEC
 INCIDENT NUMBER REPORT TYPE
 REPORT BY
 REPORT TYPE

B Property Details

B1 Not Residential
 Estimated Number of residential living units in building of origin whether or not all units house involved

B2 Buildings not involved
 Number of buildings involved

B3 Home
 Approximate location of origin (street address) More than one room

C On-Site Materials None
 Complete if there were any significant amount of materials, including any hazardous materials or materials at the property, whether or not they have been removed.

Enter up to three codes. Check one or more boxes for each code entered.

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

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

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

D Ignition

D1 Engine area, running
 Area of fire origin

D2 Heat from power
 Area of fire origin

D3 Electrical wire, cable
 Area of fire origin One confined to object of origin

D4 Other
 Type of material ignited (see Section 4) Ignited area (see Section 4)

E1 Cause of Ignition
 Check box if this is to account report. See Section 4

1 Intentional
2 Unintentional
3 Reason of equipment or load present
4 Act of nature
5 Under further investigation
U Cause undetermined after investigation

E2 Factors Contributing To Ignition None

1 Electrical
 Name contributing to ignition (1)

1 Human Factors Contributing To Ignition
 Check all applicable boxes

1 Sleep None
2 Possibly impaired by alcohol or drugs
3 Unattended person
4 Possibly mental disorder
5 Possibly disabled
6 Multiple persons involved

7 Age was a factor
 Estimated age of person involved

1 Male **2** Female

F1 Equipment Involved In Ignition
 Name of equipment was not reported, refer to Section 4

Brand: _____
 Model: _____
 Serial #: _____
 Year: _____

F2 Equipment Power
 Equipment power source

F3 Equipment Portability
1 Portable
2 Stationary

Portable equipment normally can be moved by one person. Is designed to be used in multiple locations, and requires no tools to install.

G Fire Suppression Factors
 Enter up to three codes. None

Fire suppression factor (1): _____
 Fire suppression factor (2): _____
 Fire suppression factor (3): _____

H1 Mobile Property Involved
 None

1 Not involved in ignition, but damaged
2 Involved in ignition, but not damaged
3 Involved in ignition and damaged

H2 Mobile Property Type & Make

H1 Passenger car
 Mobile property type

H2 None
 Mobile property make

Local Use
 Non-fire use available
 Type of the information presented in this report may be used upon request from other agencies

Arrest report attached
 Police report attached
 Customs report attached
 Other reports attached

F-150 1997
 Mobile property model Year

License Plate Number: _____ State: _____ VIN Digit: _____

01/12/2005

15:12

08-5763564

ORDING BE-0117 D

PAGE 03

08012

PL

1/10

2005

394

05-000150

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Complete

Narrative

Narrative:

call initially reference vehicle fire that had spread to home... requested dispatch to call full alarm... upon arrival found fully involved full size p/u truck in driveway... vehicle close to home... 1 1/4" hose pulled... fire extinguished approx 350 gal water... noted some fascia/eaves melted from heat, but no fire intrusion into home... attic checked for extension by Sgt-42... attic area ventilated... homeowner advised of situation... he will contact insurance co in morning... returned to service.

01/28/2005 15:12 9946783964

CRASH REPORT

PAGE 01

Level: Captain Includes area of applicant Date Recd Date Recd

Check this box if your account is not in good standing. Please enter the reason for the account status.

Mr., Ms., Mrs. First Name MI Last Name Initial

Number Street or Highway Street Type Office

Post Office Box Apt., Suite, Room City

Name Zip Code

Have people involved? Check this box and attach Supplemental Forms (NF102-1B) as necessary.

Rd Owner Have to provide applicant with this box and ship the rest of this section.

Level: Captain Includes area of applicant Date Recd Date Recd

Mr., Ms., Mrs. First Name MI Last Name Initial

Number Street or Highway Street Type Office

Post Office Box Apt., Suite, Room City

Name Zip Code

I. Remarks
Level: Captain

call initially reference vehicle fire that had spread to home...requested dispatch to call full alarm...upon arrival found fully involved full size p/u truck in driveway... vehicle close to home... 1 3/4" hose pulled...fire extinguished approx 350 gal water... noted some Espacia/saves melted from heat, but no fire intrusion into home... attic checked for extension by Sgt-92... attic area ventilated... homeowners advised of situation... he will contact insurance co in morning... returned to service.

II. Authorization

5009 Officer in charge ID	Johnson, William S Signature	CPD Position of rank	RE-54 Assignment	02 Month	18 Day	2005 Year
5009 Officer in charge ID	Johnson, William S Signature	CPD Position of rank	RE-54 Assignment	01 Month	10 Day	2005 Year

01/16/2005

15:12

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ORANGE COUNTY

PAGE 01

09012

FL

1 10

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05-0000150

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PAGE OF
RESPONDING
PERSONNEL

Staff ID\Staff Name	Unit	Activity	Position	Rank	PayStd	Wks	Hours	Rate
1571 Davis, Carrie A	RE-93	FX Fire Department		FFP		0.00	3.00	0.00
3240 King, David M	RE-93	FX Fire Department		FFP		0.00	3.00	0.00
4237 Quartler, Nathan D	RE-93	FX Fire Department		FFP		0.00	3.00	0.00
5009 Johnson, Willie S	RE-94	FX Fire Department		FFP		1.17	1.17	0.00
5600 Mizek, Travis J	RE-94	FX Fire Department		FFP		1.17	1.17	0.00
8189 Dunn, Jerald H	RE-94	FX Fire Department		FFP		1.17	1.17	0.00
4756 Kelly, Dale	SQT-92	FX Fire Department		FFP		1.01	1.01	0.00
4992 Baranowski, William	SQT-92	FX Fire Department		FFP		1.01	1.01	0.00
7502 Marceony, Matthew C	SQT-92	FX Fire Department		FFP		1.01	1.01	0.00

Total Participants :

Total Personnel Hours: 5.94

An 'X' next to the unit denotes driver.

Orange Beach Fire Department

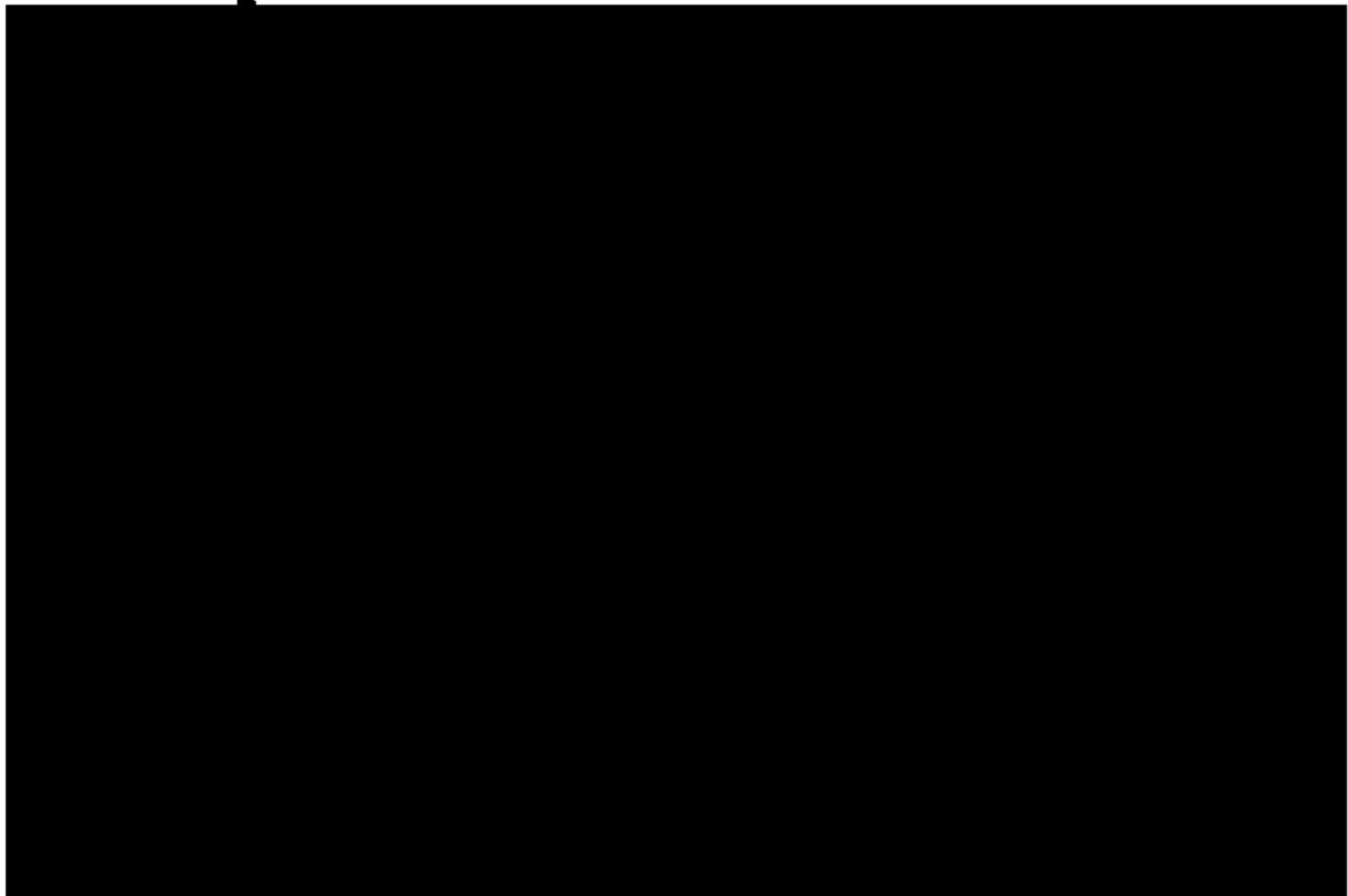
09012 01-19-2005 05-0000150

Ken's

Auto

Detail

(No Documents)





SELECTIVE
Insurance

Elizabeth Werner, LPCS
P O Box 763
Branchville, NJ 07826-0763
Tel: 800-777-9656 x2577
Fax: 973-948-2089
Elizabeth.Werner@selective.com

JUN 03 2005

May 23, 2005

Ford Motors Company
PO Box 1904
Dearborn, MI 40121
Attn: Frank M. Ligon



Re: Insured: [REDACTED]
Claim #: [REDACTED]
D/L: 7/19/2004
Your Insured: Ford Motors Company
Your Claim #: 2001 F150 Ford Truck
Damages: \$10,609.68 (SALVAGE COMPLETE)

Dear Ford Motors Company:

We understand that you are the liability carrier for Ford Motor Company. Please be advised that our Insured has sustained damages in the amount of \$10,609.68 (Salvage Complete). We have now paid our insured in full, less any applicable deductible.

Our investigation shows that your insured is the responsible party for our Insured's damages. We hereby respectfully request full reimbursement under our subrogation rights. We are also enclosing documentation of the damages.

If you are unable to pay this claim at the present time, please advise us immediately as to the reasons. We remind you that this settlement request fulfills our arbitration requirements.

Thank you for your prompt attention to the matter.

Sincerely,

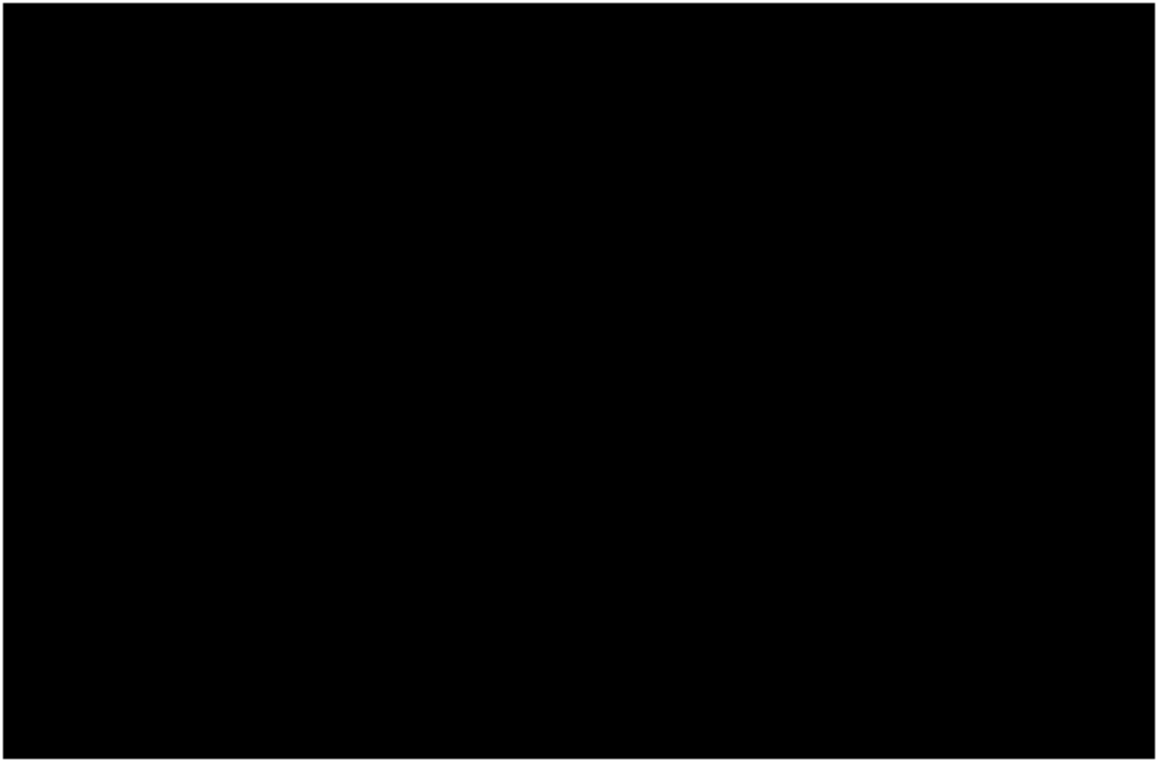
Elizabeth Werner, LPCS
Claims Representative

Enclosure

2005-025-LC1-2508



ENR-085-L01-2889





APR 26 2005

ALLSTATE INSURANCE COMPANY
P. O. BOX 168288
IRVING TX 75016

(800) 374-4246

04/13/05

FORD MOTOR COMPANY
APR 27 2005
OFFICE OF THE
GENERAL COUNSEL

FORD MOTOR COMPANY
P.O. BOX 6248
DEARBORN MI 48126

OUR INVESTIGATION INDICATES THAT YOUR INSURED WAS RESPONSIBLE FOR THIS LOSS.

SINCE WE HAVE ALREADY MADE A SETTLEMENT WITH OUR POLICYHOLDER, THE CLAIM HAS BEEN ASSIGNED TO US. COPIES OF THE FINAL PAPERS RELATING TO THE LOSS ARE ENCLOSED.

PLEASE ACCEPT THIS LETTER AS NOTICE OF OUR SUBROGATION CLAIM. PLEASE FORWARD YOUR PAYMENT WITH OUR CLAIM NUMBER TO:

ALLSTATE PAYMENT PROCESSING CENTER
P.O. BOX 227257
DALLAS, TX, 75222-7257

DIRECT ANY OTHER CORRESPONDENCE TO THE ADDRESS AT THE TOP OF THIS LETTER.

SINCERELY,

SUBROGATION CLAIM REP

ALLSTATE INSURANCE COMPANY

C6P:G

YOUR FILE NO. : SELF
YOUR INSURED : FORD MOTOR COMPANY
ADDRESS : P.O. BOX 6248
DEARBORN MI 48126

OUR CLAIM NO. : [REDACTED]
OUR INSURED : [REDACTED]
LOSS DATE : 07/15/01

2005-005-LC1-2510

LOCATION :
RTE 329 OR 349

CROSS CITY FL

2.4

Figure #1 is a view of the front of the vehicle.



2.5

Figure #2 is a view of the front half of the vehicle, driver side.



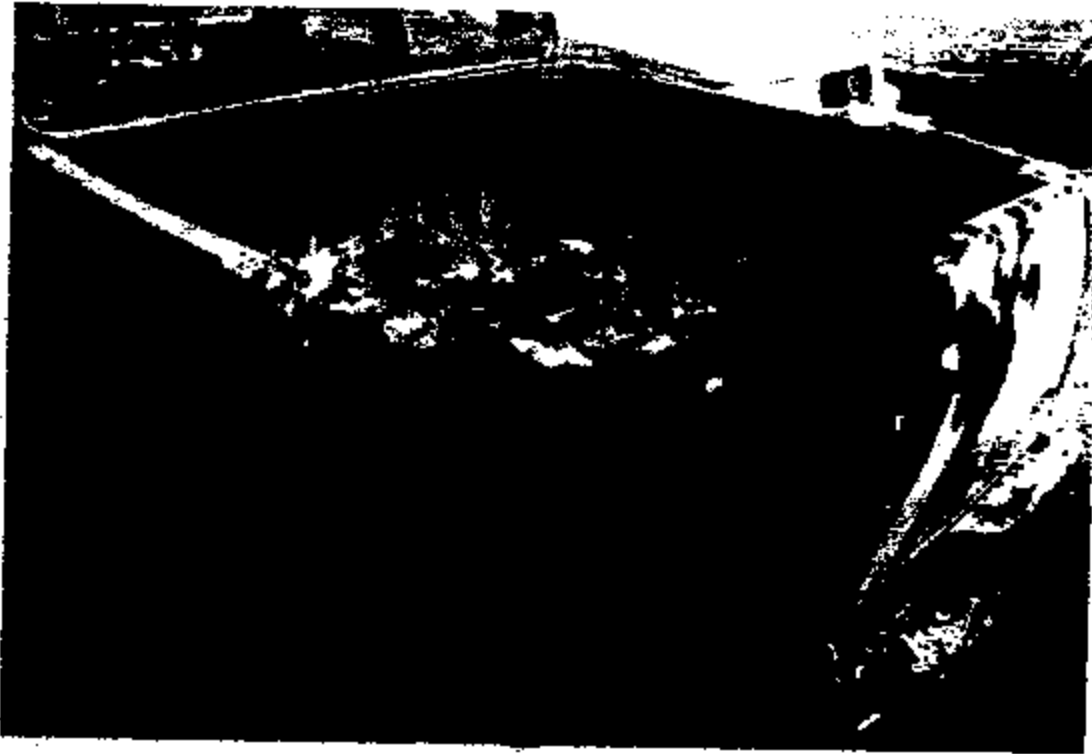
2.6

Figure #3 is a view of the rear half of the vehicle, driver side.



2.7

Figure #4 is a view of the rear of the vehicle.



2.8

Figure #5 is a view of the vehicle passenger side.



2.9

Figure #6 is a view of the engine compartment. Note: Oxidation at rear of engine, near firewall.



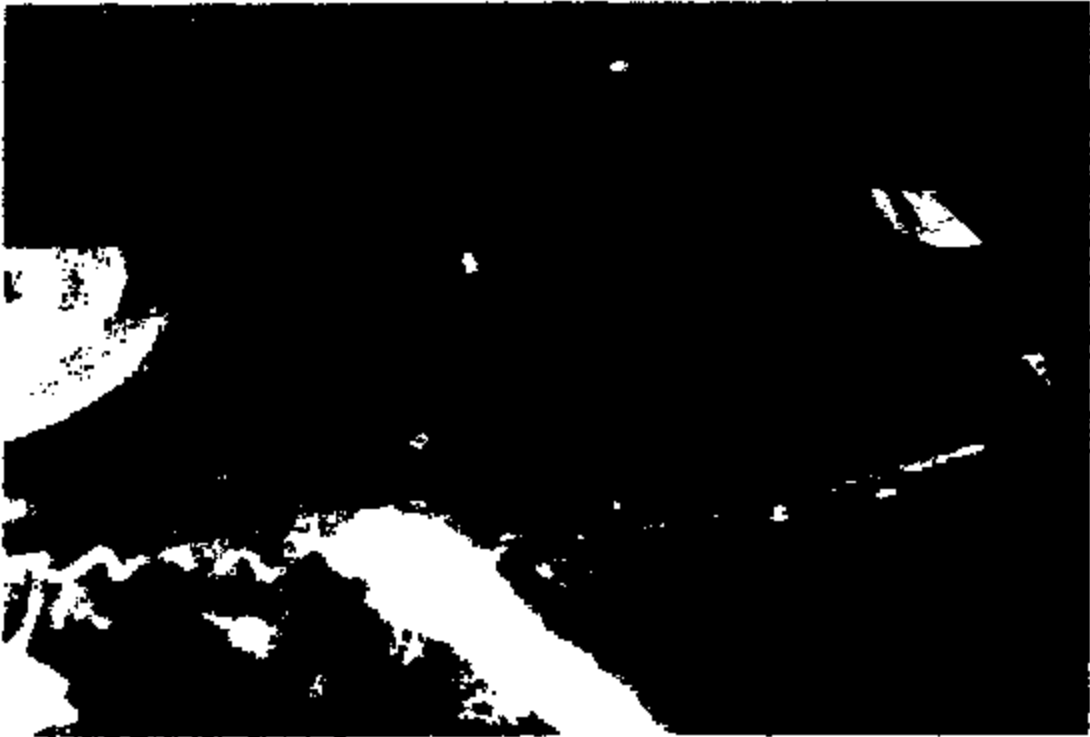
2.10

Figure #7 is another view of engine compartment as seen from passenger side. Note:
Exterior damage as result of extended burn time coupled with fire load.



2.11

Figure #8 is a view of the engine compartment fuel rails and couplings. Note: They are intact.



2.12

Figure #9 is a view of the rear interior of the vehicle as seen from the driver side. Note: Heavy char with little metal discoloration on passenger door indicates fire burned cooler in this area.



2.13

Figure #10 is a view of the front seat area as seen from the driver side. Note: Extensive damage to dashboard at left.



2.14

Figure #11 is a view of the passenger compartment of the vehicle as seen from the rear window. Note: Arrow indicates area of origin.



2.15

Figure #12 is a view of an under dash wire fused directly to the firewall.



2.16

Figure #13 is a view of the dashboard area as seen from the passenger side. Note: Large mass of molten wiring at arrow.



2.17

Figure #14 is a closer view of the heavily damaged under dash wiring harness. Note:
Arrow indicates heaviest charred area.



2.18

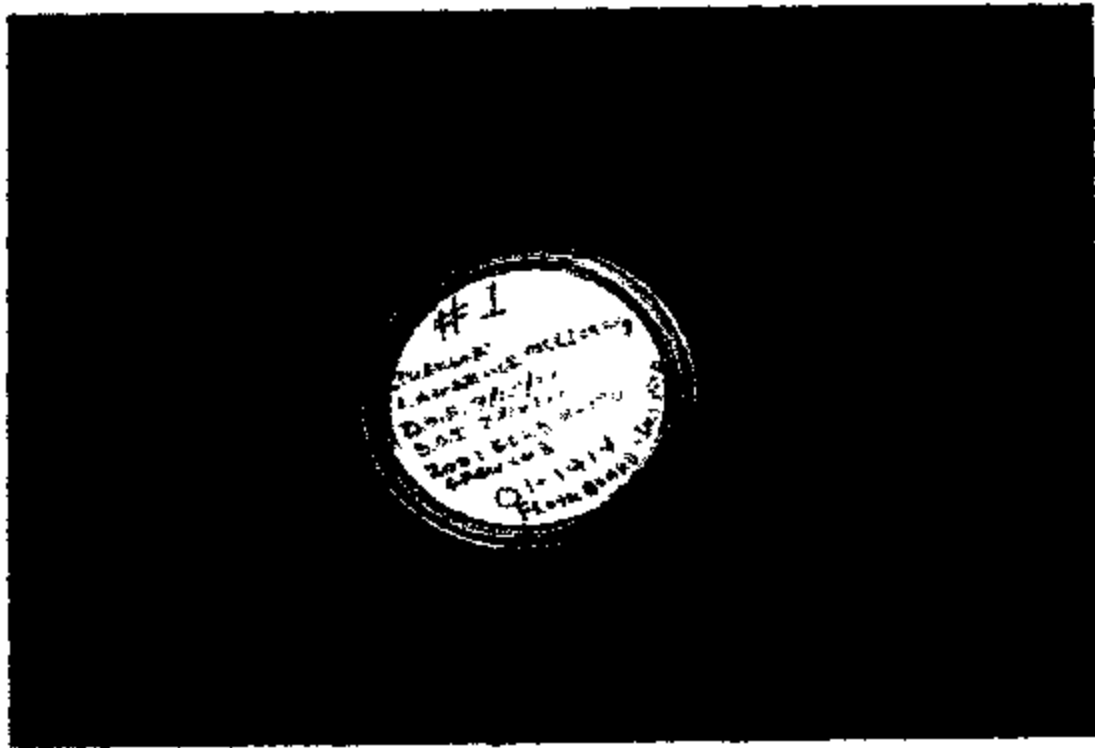
Figure #15 is a closer view of the heavily oxidized wiring bundle under dash. Note:

Wiring exhibits signs of current overload and was extremely brittle to touch.



2.19

Figure #16 is a view of the fire debris sample #1 collected from the front driver side floor board.



2.20

Figure #17 is a view of fire debris sample #2 collected from the rear seat area floor board.





CIVIL ACTION No.: 030071

**DANNY MINTER AND CAREY MINTER,
INDIVIDUALLY**

VS.

**FORD MOTOR COMPANY; AND SULLIVAN MOTOR
COMPANY**

**IN THE DISTRICT COURT OF
HOUSTON COUNTY, TEXAS**

3RD JUDICIAL DISTRICT



**HOUSSIERE
DURANT
HOUSSIERE
LLP**

FOR SETTLEMENT PURPOSES ONLY

Danny Minter and Carey Minter, Individually

TABLE OF CONTENTS

- I. Statement of Facts
- II. Property Damage Summary
 - A. Photographs
 - B. List of Inventory and Appraisals for Minter Flying Service
 - C. Hanger Rebuilding Estimates
 - D. Houston County Fire Marshal Investigation Report
 - E. Invoices from Sullivan Motor Company for repairs on Ford Expedition
- III. Demand Summary

STATEMENT OF FACTS

██████████ and his wife ██████████ have been married for over thirty-one years. They are the owners of a crop dusting business—██████████ Flying Service. ██████████ has flown crop dusters since he was fourteen years old. In addition, before he suffered a total loss due to the fire caused by the 1999 Ford Expedition, he was in the process of starting a parts distribution and engine rebuilding business for crop dusting planes. However, ██████████ is unable to fulfill these plans due to the losses he suffered. Furthermore, since the fire, ██████████ Flying Service's business has decreased by almost ninety-five percent.

Danny's daughter owned the 1999 Ford Expedition (believed to have identification number 1FMRU17L6X ██████████ and license plate number ██████████). She had been complaining that the rear windshield wipers would go on and off, the radio was difficult to turn on and would turn on and off, the volume would go up and down unexpectedly, and the vehicle would stall. In fact, the Minters took the Expedition to Sullivan Motors on numerous occasions complaining of these problems. Furthermore, before the fire, on or about June 12, 2002, ██████████ took the vehicle to a local garage and they hooked it up to a diagnostic machine and told him that they found nothing. Believing that the Expedition was safe, he then drove the Expedition out to his airstrip and parked it inside his hangar. After sometime at the facility, he tried to leave in the Expedition, but it would not turn over. He hooked the Expedition up to a battery charger and went back out to the airstrip when suddenly and unexpectedly the vehicle ignited and caught on fire. The fire spread throughout the building causing an explosion which resulted in total destruction of the

hangar and most of its contents. It is the determination of all investigators involved in this case, including Tom West and Joel Moore of Crawford Investigations Services and Jeffrey Hautanen of Bison Engineering, and all experts that the fire started in the 1999 Ford Expedition.

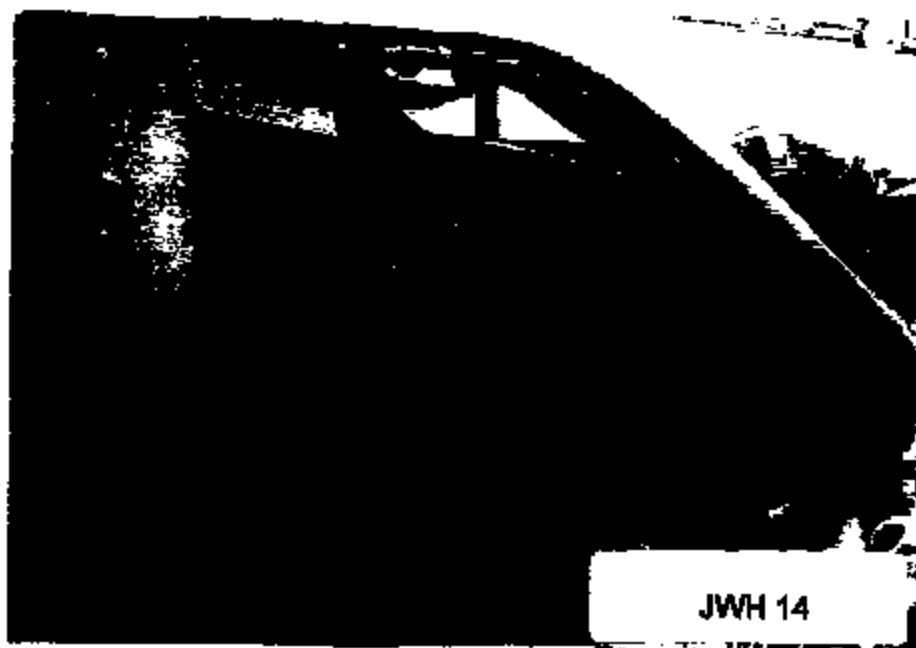
Defendant Ford designed, manufactured and marketed the Ford Expedition which was in substantially the same condition as when the Expedition left the possession of Ford.

Defendant Sullivan Motor Company Inc., located in Crockett, Texas, advertised and sold the Ford Expedition in question to the Plaintiffs, which was in substantially the same condition as when the Expedition left the possession of Sullivan Motors.

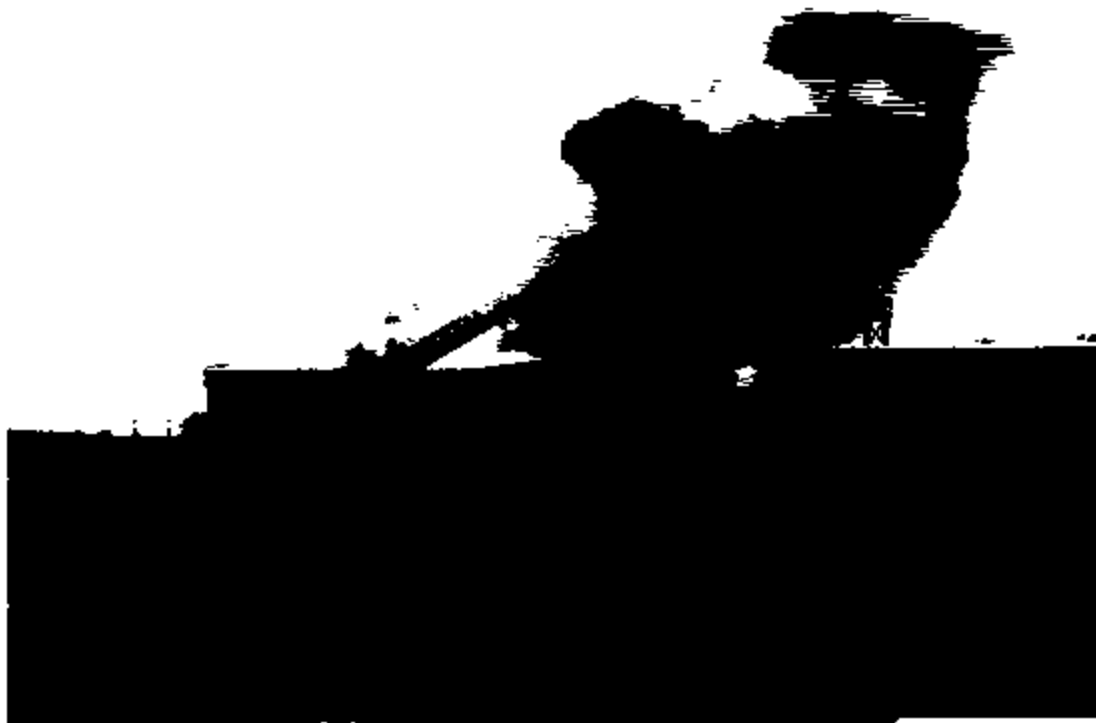
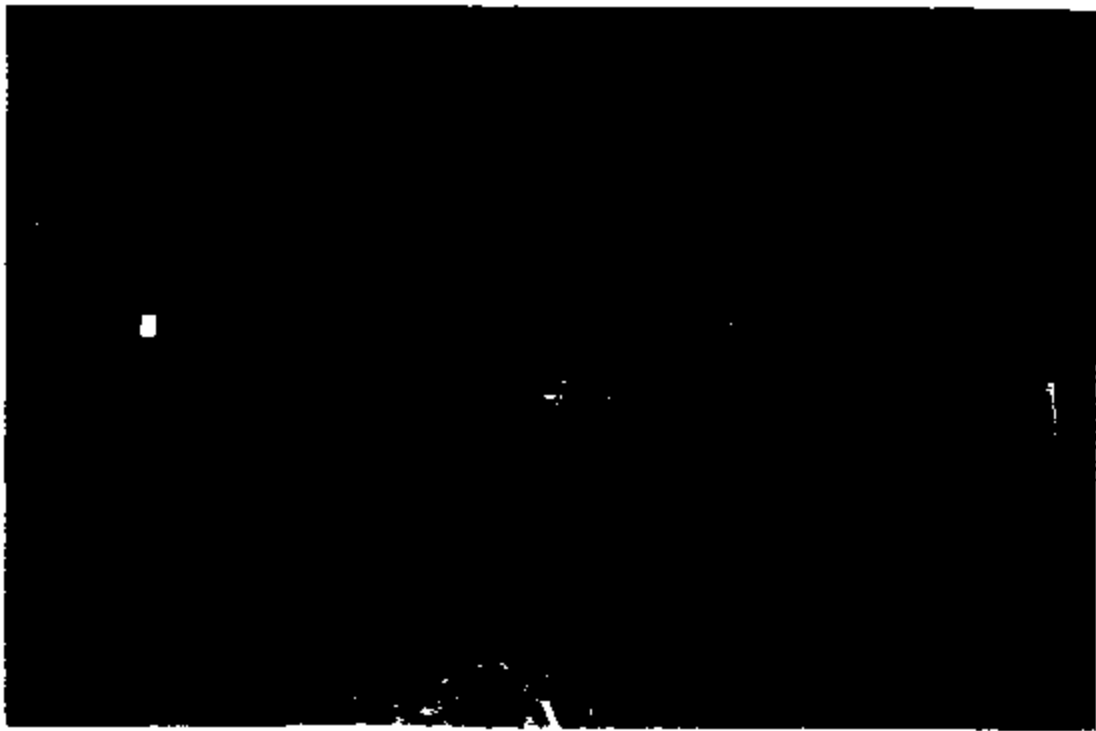
PROPERTY DAMAGE SUMMARY
Danny Minter and Carey Minter

Minter Flying Service Inventory	\$2,041,944.68
Personal Property	\$10,533.69
Rebuilding Cost	\$163,900.00
Loss of business (June 2002 - May 2003)	\$25,000.00
TOTAL	\$2,241,378.37

A





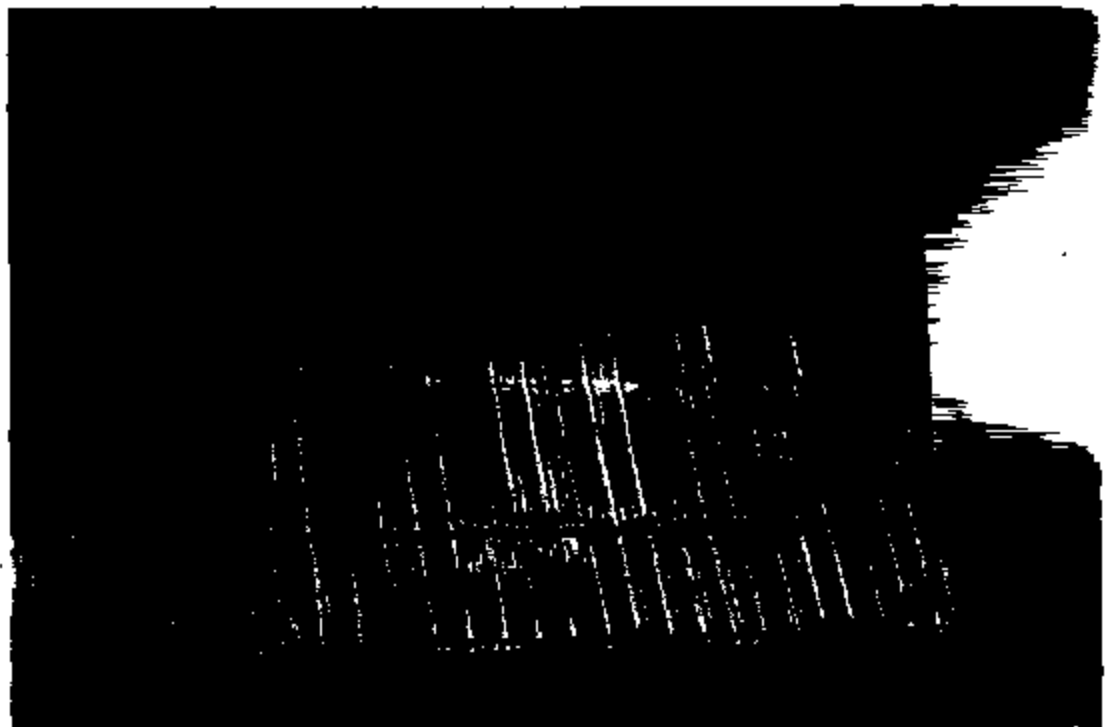


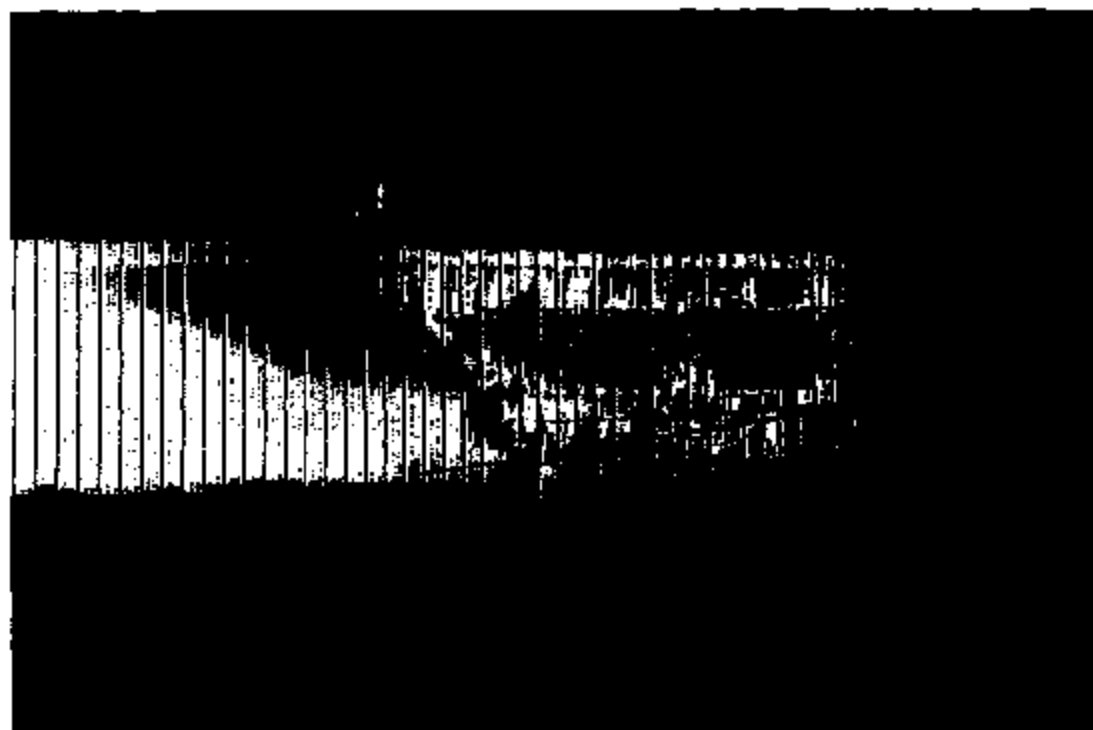
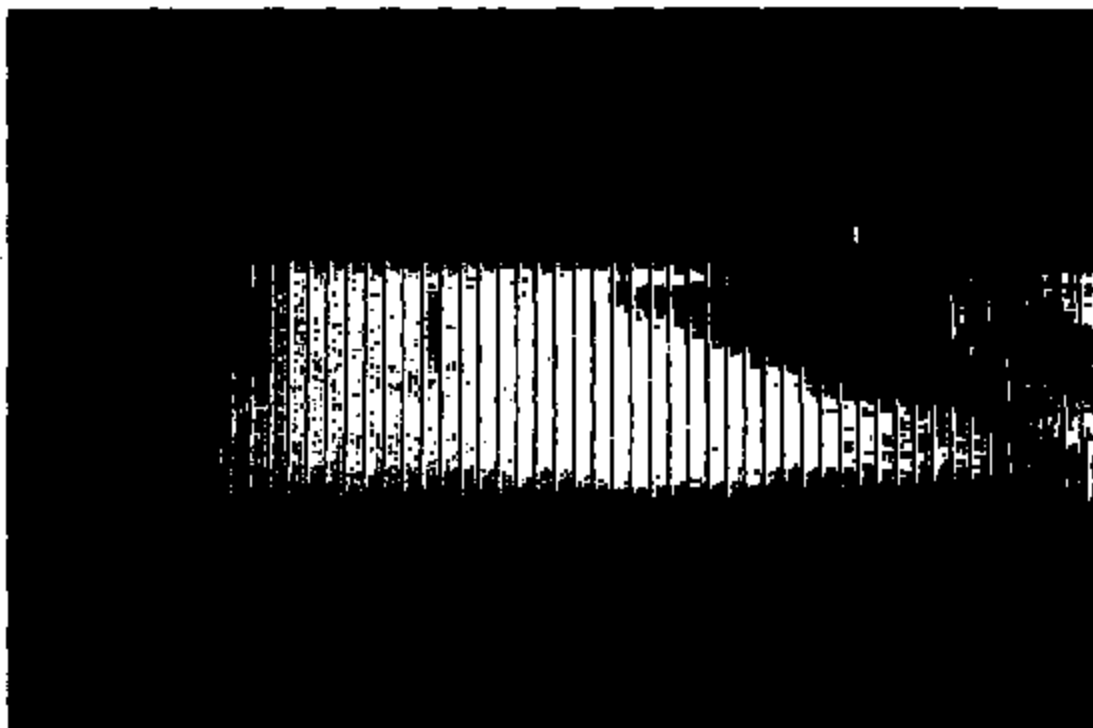


ER05-005-LC1-2938

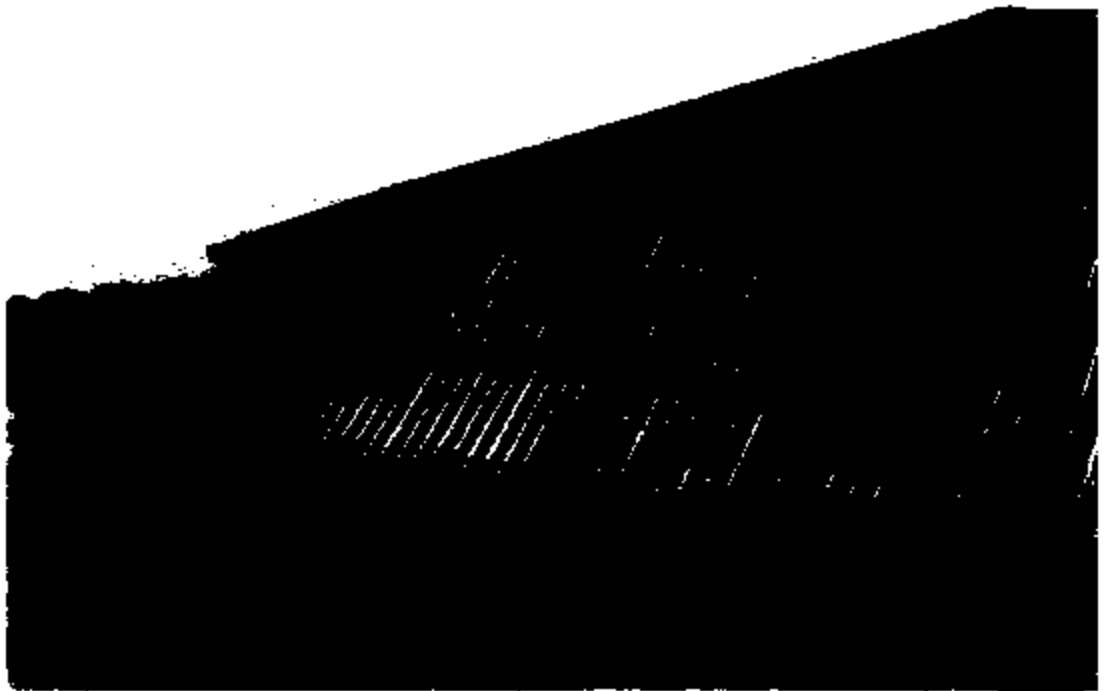


EROS-825-LC1-2548





ER05-005-LC1-2542



ER05-085-LC1-2543

**HOUSTON COUNTY FIRE MARSHAL
INVESTIGATION REPORT
020601-C**



**CONFIDENTIAL
COPY
DO NOT RELEASE**

This report is furnished to an investigating law enforcement agency for criminal justice purposes only, and is not for public release.



**HOUSTON COUNTY FIRE MARSHAL'S OFFICE
INVESTIGATION REPORT
SENSITIVE**



Case #: 020601-C	Priority: 1	Investigator: 1501	Status: SUI
Day of Fire: Wed	Date of Fire: 6/12	Time of Fire: 1622	Cause of Fire: SHI Acc
Date of Request: 6-12-02	Date Case Assigned: 6-12-02	Date of Investigation: 6-13-02	
City of Fire: NA		County of Fire: Houston	
Location of Fire: Houston County Airport, SH 7 East GPS: N 31.16.733 W 95.24.164			
Type Of Fire Investigation: 1	Injuries: NA	# 0	Deaths: NA # 0

OWNER

Full Name:				Phone #	
Address:	Crockett, Texas				
Race:	Other:-	Sex:	Age:	Date of Birth:	
Social Security #	Driver's License # Tx				
Insurance: Y	Insurance Company Name: Farm Bureau, Travelers, US Aviation U.				
Policy # See body	Effective Dates: to				
Amount of Policy: \$	Structure: \$	Contents: \$			
Adjusters Name:				Adjusters Phone # ()	
Agents Name:				Agents Phone # ()	
Agents Address:					

OCCUPANT

Full Name:				Phone #	
Address:	Crockett, Texas				
Race:	Other:-	Sex:	Age:	Date of Birth:	
Social Security #	Driver's License # Tx				
Insurance: Y	Insurance Company Name: See Body				
Policy #	Effective Dates: to				
Amount of Policy: \$	Structure: \$	Contents: \$			
Adjusters Name:				Adjusters Phone # ()	
Agents Name:				Agents Phone # ()	
Agents Address:					

DISCOVERED FIRE

Full Name:				Phone #	
Address:	Crockett, Texas				
Race: W	Other:-	Sex:	Age:	Date of Birth:	
Social Security #	Driver's License # Tx				



**HOUSTON COUNTY FIRE MARSHAL'S OFFICE
INVESTIGATION REPORT
SENSITIVE**



REPORTED FIRE

Full Name: [REDACTED]		Phone # [REDACTED]	
Address: [REDACTED] Crockett, Texas [REDACTED]			
Race: [REDACTED]	Other: -	Sex: [REDACTED]	Age: 50
Date of Birth: [REDACTED]		Driver's License # Tx [REDACTED]	
Social Security # [REDACTED]			

MOTOR VEHICLE

Type of Vehicle: SUV	Year: 1999	Make: Ford	Model: Expedition
Vehicle use: TXLP CS9-DNV	Color of Vehicle: Unk	VIN # 1FMRU17L6X1 [REDACTED]	

OTHER INFORMATION

Other Investigating Agencies: Farm Bureau, Crawford Investigation Services		
Responding Fire Department: Crockett, Latexo, Grapeland, Lovelady & Kennard Fire Depts		
Weather Conditions: PC Temp:93 Humidity: 47%	Wind Direction: East	Velocity: 3 g 8

ADMINISTRATIVE SECTION

Arson Lab Utilized: NA	K-9 Utilized: NA
Approved By: -	Date: -



**HOUSTON COUNTY FIRE MARSHAL'S OFFICE
INVESTIGATION REPORT
SENSITIVE**



**CASE # 020601-C
CONTINUATION:**

INVESTIGATOR: 1501

SYNOPSIS:

The Crockett Fire Department received a call of a hanger on fire located at the Houston County Airport at 1622 on 6-12-02. Upon arrival heavy smoke was observed coming from the structure, which was a metal, 63' x 79' structure. Encore was called to shut off the power to the metal structure, so that suppression operations could be started. Additional assistance was called for from Latexo, Grapeland, Lovelady, and Kennard Fire Departments. Suppression operations were started and the fire was extinguished.

SCENE SUMMARY:

1. 63' X 79' metal hanger, located at the Houston County Airport on the West side of the airport complex.
2. GPS: N 31.16.733 W 95.24.164
3. The North side of the structure had a single pedestrian door and a 55' hydraulic lift door
4. The West side of the structure had a single pedestrian door
5. The South side of the structure had a 14' metal door that was hinged on the west side
6. All doors opened to the outside of the structure.
7. The Office area was a 20' x 16' area containing standard office furnishings (Room #1 on the diagram) (Northeast corner of structure)
8. The Paint area was a 47' x 16' area containing equipment and a self-contained paint booth. (room #2 on the diagram)
9. The Main Hanger area was a 63' x 63' area that contained (4) aircraft, (4) vehicles, a fuel trailer and various tools, other equipment and other items.
10. The Area of Origin of the fire was in the center of the Northwest quarter of the structure.
11. Weather: Temp: 93 degrees Humidity: 47% Wind: East Speed: 3 MPH gusts 8 MPH Sunny and partly cloudy

DETAILS OF INCIDENT:

The Crockett Fire Department received a call of a hanger on fire at the Houston County Airport, located approximately 2 miles East of Loop 304 on SH 7, at 1622. Upon the arrival of Unit #401, Crockett Fire Chief D. Deckard, at 1626, it was advised that heavy smoke and fire were coming from the interior of the structure, which was a single story metal building. This officer arrived on scene at 1628 and proceeded to be briefed by the building owner, [REDACTED] stated that the contents of the building was an

estimated 800 gallons of aviation fuel, three large agriculture vehicles, an SUV, a fuel trailer and a large quantity of wooden crates and other smaller items. [REDACTED] advised that there were no chemicals in the building. The electrical wiring to the building was shorting out on the metal buiding and Encore was called to de-energize the structure so that suppression oerations could be started. At approximately 1730 Encore arrived on scene and suppression operations were started and the fire extinguished.

After suppression operations were started this officer assisted in the Rehab area, until the fire was extinguished and the area was safe to enter.

Upon arrival at the fire scene at 1628, this officer had observed that it appeared the fire was mainly in the Northwest quarter of the structure. After entering the building, through the Office door, located on the North side of the structure, a cursory examination of the interior of the structure was conducted. The Office area had been completely destroyed by the fire, leaving the metal ceiling joists sagging. All of the contents of this room had heavy fire damage, almost to complete destruction with the exception of metal cabinets and the frame work of chairs and a couch. The exterior metal door had structural damage as the FD had to make forced entry at this point.

Entering the Main Hanger Area, through the West Office Pedestrian door, the area contained numerous vehicles and aircraft in varying stages. All of this equipment was either directly damaged by fire or the heat associated with the fire being trapped within the confines of the metal building. Proceeding from East to West on the North side of the Hanger area, it was observed that the fire damage showed that the fire had been concentrated in an area to the East of a 1999 Ford Expedition and West of a large Ag spraying truck. The West side of the large rear tire of the truck was destroyed by fire, while the East side showed little direct fire damage. Located between the Expedition and the truck was a small trailer the showed signs of heavy fire damage. It later determined that this trailer was used to transport a 500 gallon fiberglass tank containg aviation fuel. This had probable been the source of the fire running under the Main Hanger door onto the ground on the North side of the building prior to the start of suppression operations. The left side of the Expedition, although completely destroyed by fire, showed signs of heavier damage. The aluminum whells on the left side of the vehicle had areas that were melted by the fire. The aluminum wheels on the right side of the vehicle were not damaged in this manner and were bacisly in tact.

Almost directly above the Expedition was a main roof "T" beam. this was the only "T" beam that showed any signs of fatigue from heat. Also the interior side of the metal roof covering showed an area of almost "clean burn". It was determined that the area of the Expedition was the Area of Origin of the fire.

After the completion of Salvage and Overhaul by the fire department, the structure was secured.

6-13-02 0730

This officer returned to the Houston County Airport and met the building owner, [REDACTED]. A Consent to Search form was signed by [REDACTED] and the investigation continued.

Photographs were taken of the exterior of the building. The interior of the building was photographed and a rough sketch was made of the building. Due to the nature of the loss of this fire, and the fact that three (3) insurance companies were involved, the interior of the building was left as is until the arrival of all investigators on 6-17-02. At this time a complete investigation will be conducted into the cause of the fire.

This officer interviewed the owner [REDACTED] as to what had occurred prior to the discovery of the fire. [REDACTED] stated that he had his daughter Expedition because she was having trouble with it. He had taken it to Albert's Garage earlier on 6-12-02, and was to return it later that day. The vehicle appeared to have some type of electrical problem, as the instrument panel gauges would start fluctuating and then the engine would stop running. The battery would go down and have to be charged. Also the wiring to the battery would get extremely hot, even when the vehicle was not running. [REDACTED] stated that he had placed the vehicle in the hanger and hooked it up to a battery charge, to recharge the battery. He had just completed servicing one of his aircraft, East of the hanger next to the runway, when he heard a low compression explosion type sound. When he looked around he observed that smoke was coming from his hanger. [REDACTED] then attempted to locate his cell phone and remembered that it was in the office of the hanger. Upon leaving the airport, on the East side, away from the burning hanger, he saw a vehicle stopped on the side of the road. He approached the occupants, questioned if they had a cell phone, which they did, and asked them to call 911. [REDACTED] then proceeded to the West entrance of the airport to keep any traffic from entering the area until the arrival of the fire department.

This officer was contacted by DFM P. Blaylock, who is a mechanic, and advised he had information relating to this case. Upon meeting with Blaylock he showed this officer a "All Technical Service Bulletin" pertaining to the battery saver relay "Malfunction" on 1999 Ford Expeditions. See attached copy.

At approximately 1630, this officer met with Kerry Porter and Robert Houck, who are representatives of the United States Aviation Underwriters Company. These subjects did a walk through inspections of the interior of the hanger, taking photographs and notes. Porter stated that someone representing the company would be back on 6-17-02 to be apart of the investigation of the interior of the hanger.

This officer had been contacted by Ken Finley, CFI, who will be representing Farm Bureau Insurance, Tom West and Joel Moore of Crawford Investigation who will be representing Travelers Insurance, and Kerry Brewer of Travelers Insurance, who will all be on scene on 6-17-02 at approximately 0900, to conduct the investigation into the cause and origin of this fire.



**HOUSTON COUNTY FIRE MARSHAL'S OFFICE
INVESTIGATION REPORT
SENSITIVE**

**CASE # 020601-C
CONTINUATION:**

INVESTIGATOR: 1501

6-19-02 0930

This officer met with Tom West and Joel Moore of Crawford Investigation Services at the Houston County airport. Upon the arrival of Jeffrey Hautanen of Bison Engineering, Inc., further investigation into the cause of what in the Ford Expedition had malfunctioned causing the fire was conducted.

After Hautanen had completed his investigation he stated that the vehicle would need to be moved to a secure location, so that a more complete examination of the vehicle could be conducted. Hautanen stated that there was, he thought, enough left in the vehicle to determine the part that had caused the fire.

West stated Ford Motor Company would be advised and given a chance to inspect the vehicle in place before it was moved.

It is the determination of all investigators involved in this case that the fire started in the 1999 Ford Expedition,



**HOUSTON COUNTY FIRE MARSHAL'S OFFICE
INVESTIGATION REPORT
SENSITIVE**



**CASE # 020601-C
Photo Log:**

INVESTIGATOR: 1501

-
1. Overview of Fire Scene East to West
 2. "
 3. "
 4. "
 5. "
 6. "
 7. "
 8. "
 9. "
 10. "
 11. "
 12. "
 13. East side of Hanger
 14. North side of Hanger
 15. West side of Hanger
 16. West section of Main Hanger door
 17. Center section of Main Hanger door
 18. East section of Main Hanger door
 19. Ladder #1 CFD
 20. Grass #7 CFD
 21. Rehab Area
 22. East section of North side of Hanger
 23. Center section of North side of Hanger
 24. Center section of North side of Hanger
 25. West section of North side of Hanger
 26. West side of Hanger (North section)
 27. West side of Hanger (South section)
 28. West side of Hanger (Southwest corner)
 29. West side of Hanger
 30. West section of South side of Hanger
 31. Center section of South side of Hanger
 32. East section of South side of Hanger
 33. South section of East side of Hanger
 34. North section of East side of Hanger
 35. Southwest corner of Office area
 36. Southeast corner of Office area
 37. South ceiling of Office
 38. Northeast corner of Office floor
 39. Northeast corner of Office ceiling

40. Ceiling beams in Office (West to East)
41. Ceiling beams in Office (West to East)
42. Floor area North section of Office
43. Floor area South section of Office
44. Aircraft Southeast section of Main Hanger area
45. Aircraft Northeast section of Main Hanger area
46. Spray Truck North section of Main Hanger area
47. Spray Truck North section of Main Hanger area
48. Spray Truck North section of Main Hanger area (West side)
49. Auger Truck South Center section of Main Hanger area
50. Rear of 1999 Ford Expedition
51. Aircraft frame & Spray Truck West side of Main Hanger area
52. Aircraft frame West section
53. Rear of Spray Truck
54. Rear of Spray Truck
55. Left front of 1999 Ford Expedition
56. Right front of 199 Ford Expedition
57. Battery charger in front of 1999 Ford Expedition
58. Right front of 1999 Ford Expedition
59. Battery area in engine compartment of 1999 Ford Expedition
60. TXLP 1999 Ford Expedition
61. Interior roof area damage (Bent beam)(West center section)
62. Interior roof damage West section
63. Interior roof damage North section
64. Interior roof damage South section
65. Tools Northwest section of Main Hanger area
66. Fan Northwest section Main Hanger area (Note damage to fan blades)

kv501 FDID	TX State	6/12/2002 Incident Date	01 Station	648 Incident Number	0 Exposure	NFIRS - 1 Basic
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Location Directions Address is on the Wildland Fire Module Census Tract: 2

Number/Milepost	Prefix	Street or Highway	Street Type	Suffix
Apt./Suite/Room HO. CO. AIRPORT Cross street or directions	Crockett City		TX State	Zip Code

Incident Type 111 Building fire Aid Given or Received Mutual aid received	Their FDID State		Dates & Times		Shifts & Alarms	
	Their Incident Number		Alarm: 6/12/2002 16:22:00		D 5 2	
			Arrival: 6/12/2002 16:26:00		Shift	Alarm Dist
			Controlled: 00:00:00		Special Studies	
			Last Unit: 6/12/2002 22:00:00			

Actions Taken 11 Extinguish Primary Action Taken (1) 12 Salvage & overhaul Additional Action Taken (2) Additional Action Taken (3)	Resources <input checked="" type="checkbox"/> Apparatus or Personnel Form Used <table border="1"> <tr> <td></td> <td>Apparatus</td> <td>Personnel</td> </tr> <tr> <td>Suppression:</td> <td>0</td> <td>0</td> </tr> <tr> <td>EMS:</td> <td>0</td> <td>0</td> </tr> <tr> <td>Other:</td> <td>0</td> <td>0</td> </tr> </table> <input type="checkbox"/> Resource counts include aid received		Apparatus	Personnel	Suppression:	0	0	EMS:	0	0	Other:	0	0
	Apparatus	Personnel											
Suppression:	0	0											
EMS:	0	0											
Other:	0	0											
Estimated Dollar Losses & Values LOSSES Property: 0 <input checked="" type="checkbox"/> None Contents: 0 <input checked="" type="checkbox"/> PRE-INCIDENT VALUE: Property: 0 <input checked="" type="checkbox"/> Contents: 0 <input checked="" type="checkbox"/>													

Casualties <input type="checkbox"/> None <table border="1"> <tr> <td></td> <td>Deaths</td> <td>Injuries</td> </tr> <tr> <td>Fire Service:</td> <td>0</td> <td>2</td> </tr> <tr> <td>Civilian:</td> <td>0</td> <td>0</td> </tr> </table>		Deaths	Injuries	Fire Service:	0	2	Civilian:	0	0	Hazardous Materials Released N None
	Deaths	Injuries								
Fire Service:	0	2								
Civilian:	0	0								

Detector	Mixed Use Property
-----------------	--------------------

Property Use 882 Parking garage, general vehicle
--

Person/Entity Involved

Business Name

Mr., Ms., Mrs. **First Name** **MI** **Last Name** **Phone Number**

[Redacted]

Number **Prefix** **Street or Highway** **Street Type** **Suffix**

Post Office Box **Apt./Suite/Room** **Crockett**

TX **City**

State **Zip Code**

Owner

Business name

Mr., Ms., Mrs. **First Name** **MI** **Last Name** **Phone Number**

[Redacted]


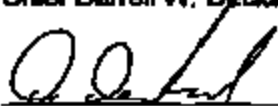
Number **Prefix** **Street or Highway** **Street Type** **Suffix**

Post Office Box **Apt./Suite/Room** **Crockett**

TX **City**

State **Zip Code**

Authorization

Officer in charge:	Deckard, Darrell, W IC Assignment	8/13/2002 Date	Signature:  Chief Darrell W. Deckard
Member making report:	Deckard, Darrell, W CHIEF Assignment	8/13/2002 Date	Signature:  Chief Darrell W. Deckard

kv501 FDID	TX State	6/12/2002 Incident Date	01 Station	648 Incident Number	0 Exposure	NFIRS - 1 Notes
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Notes Title: Incident notes

HANGER BLDG WITH HEAVY FIRE INSIDE ON ARRIVAL
MULTIPLE VEHICLES INCLUDING AIRPLAES AND PARTS
TWO FUEL CARRYING VEHICLES
TWO (2) ALL-TERRAIN FERTILIZER VEHICLES
MUTUAL AID FROM LATEXO, GRAPELAND, LOVELADY, KENNARD.
USED WATER SHUTTLE FROM TOWN
NO INTERIOR ATTACK ATTEMPTED
INITIAL ACTION DELAYED BECAUSE OF LIVE ELECTRICAL CONTACT WITH THE BUILDING
APPROX. 35,000 GALLONS OF WATER USED
PERFORMED ADDITIONAL OVERHAUL NEXT MORNING .

kv501 TX 6/12/2002 01 648 0 NFIRS - 2
 FDID State Incident Date Station Incident Number Exposure Fire

Property Details

0 Not Residential 0.000 None
 Ext. number of residential units Acres burned Less than one acre
 1 Buildings not involved
 Number of buildings involved

On-Site Materials or Products None

On-site material (1) Storage use (1)
 On-site material (2) Storage use (2)
 On-site material (3) Storage use (3)

<p>Ignition</p> <p>65 Maintenance shop or area, paint shop or area Area of origin UU Undetermined Heat Source UU Undetermined Item first ignited <input type="checkbox"/> Confused to object of origin UU Undetermined Type of material first ignited</p>	<p>Cause Of Ignition</p> <p><input type="checkbox"/> Exposure Report 5 Cause under investigation Cause</p> <hr/> <p>Factors Contributing To Ignition</p> <p><input checked="" type="checkbox"/> None NN None Factor contributing to ignition (1) Factor contributing to ignition (2)</p>
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<p>Human Factors Contributing To Ignition</p> <p><input checked="" type="checkbox"/> None</p> <p><input type="checkbox"/> Asleep <input type="checkbox"/> Possibly impaired by alcohol or drugs <input type="checkbox"/> Unattended person <input type="checkbox"/> Possibly mentally disabled <input type="checkbox"/> Physically disabled <input type="checkbox"/> Multiple persons involved</p>	<p><input type="checkbox"/> Age was a factor</p> <p>Estimated age of person involved</p> <p>Sex of person involved</p>
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kv501- FDID	TX State	6/12/2002 Incident Date	01 Station	648 Incident Number	0 Exposure	NFIRS-2 Fire
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Equipment Involved in Ignition
 None

 NNN None
 Equipment code

 Brand:
 Model:
 Serial #:
 Year: 0

Equipment Power

Equipment Power Source Code

Equipment Portability
 Portable
 Stationary

Fire Suppression Factors
 None

Fire suppression factor (1)

Fire suppression factor (2)

Fire suppression factor (3)

Mobile Property Involved
 None

 Not involved in ignition, but burned
 Involved in ignition, but did not burn
 Involved in ignition and burn

 Mobile property model: 0
 Year

License Plate Number State VIN Number

Mobile Property Type & Make

Mobile property type

Mobile property make

Local Use
 Pre-Fire Plan Available

 Arson report attached

 Police report attached

 Coroner report attached

 Other reports attached

kv501 FDID	TX State	6/12/2002 Incident Date	D1 Station	648 Incident Number	0 Exposure	NFIRS - 3 Struct. Fire
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Structure Type 1 Enclosed building Structure type code	Building Status 2 Occupied and operating Building status code
Building Height 1 Total stories at or above grade 0 Total stories below grade	Main Floor Size 0 Total square feet 60 BY 75 Length in feet Width in feet

Fire Origin 1 <input type="checkbox"/> Below grade Story of fire origin <input type="checkbox"/> Confined to room of origin <input type="checkbox"/> Confined to floor of origin <input checked="" type="checkbox"/> Confined to building of origin <input type="checkbox"/> Beyond building of origin	Number Of Stories Damaged By Flame 0 # of stories w/minor damage 0 # of stories w/significant damage 0 # of stories w/heavy damage 1 # of stories w/extreme damage
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Material Contributing Most To Flame Spread <input type="checkbox"/> No Flame Spread 63 Flammable liquid/gas - in/from final container Item contributing most to flame spread 23 Gasoline Type of material contributing most to flame spread

Presence of Detectors <input checked="" type="checkbox"/> None Present <input type="checkbox"/> Present <input type="checkbox"/> Undetermined	Detector Power Supply Power supply code	Detector Effectiveness Effectiveness code
Detector Type Detector type code	Detector Operation Operation code	Detector Failure Reason Failure reason code

Automatic Extinguishment System <input checked="" type="checkbox"/> None Present <input type="checkbox"/> Present	Automatic Extinguishment System Operation System operation code	Automatic Extinguishment System Failure Reason Failure reason code
Type of Automatic System Type automatic system code	Number of Sprinkler Heads Operating: 0	

kv501 FDID	TX State	6/12/2002 Incident Date	01 Station	648 Incident Number	0 Exposure	NFIRS - 9 Apparatus
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Unit ID:	CH1	Dispatched:	6/12/2002	16:22:00	Use:	Suppression
Serial #:		Enroute:		00:00:00		
Type:	00 Other apparatus/resource	Arrival:	6/12/2002	16:26:00		
		Clear:	6/12/2002	22:00:00		
		In Quarters:		00:00:00		

Actions Taken

1)
2)

3)
4)

Personnel ID	Name	Rank
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Deckard, Darrell, W	Chief Darrell W. Deckard	Chief
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Unit ID:	E-3	Dispatched:	6/12/2002	16:22:00	Use:	Suppression
Serial #:		Enroute:		00:00:00		
Type:	11 Engine	Arrival:	6/12/2002	16:26:00		
		Clear:	6/12/2002	22:00:00		
		In Quarters:		00:00:00		

Actions Taken

1)
2)

3)
4)

Personnel ID	Name	Rank
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Salmon, Rodney, W	Firefighter Rodney W. Salmon	Firefighter
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Salomon, Pedro, M	Firefighter/Probatio Pedro M. Salc	Firefighter/Probatio
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Unit ID:	E-4	Dispatched:	6/12/2002	16:22:00	Use:	Suppression
Serial #:		Enroute:		00:00:00		
Type:	11 Engine	Arrival:	6/12/2002	16:26:00		
		Clear:	6/12/2002	22:00:00		
		In Quarters:		00:00:00		

Actions Taken

1)
2)

3)
4)

Personnel ID	Name	Rank
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Brown, Carl	Firefighter Carl Brown	Firefighter
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Coker, Timothy, E	Firefighter/Probatio Timothy E. Cc	Firefighter/Probatio
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Marsh, Mike	Assistant Chief Mike Marsh	Assistant Chief
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kv501 FDID	TX State	6/12/2002 Incident Date	01 Station	648 Incident Number	0 Exposure	NFIRS - 9 Apparatus
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Unit ID:	L-1	Dispatched:	6/12/2002	18:22:00	Use:	Suppression
Serial #:		Enroute:		00:00:00		
Type:	13 Quint	Arrival:	6/12/2002	18:28:00		
		Clear:	6/12/2002	22:00:00		
		In Quarters:		00:00:00		

Actions Taken

1)	3)
2)	4)

Personnel ID	Name	Rank
Albright, Billy, F	Firefighter/Probatio Billy F. Albright	Firefighter/Probatio
De La Fuente, Jesus, S	Firefighter/Probatio Jesus S. De L	Firefighter/Probatio
Lamb, Blake	Deputy Chief Blake Lamb	Deputy Chief
Pugh, John, L	Firefighter/Probatio John L. Pugh	Firefighter/Probatio
Shirley, John, T	Firefighter John T. Shirley	Firefighter

Unit ID:	R-1	Dispatched:	6/12/2002	18:22:00	Use:	Suppression
Serial #:		Enroute:		00:00:00		
Type:	71 Rescue unit	Arrival:	6/12/2002	18:28:00		
		Clear:	6/12/2002	22:00:00		
		In Quarters:		00:00:00		

Actions Taken

1)	3)
2)	4)

Personnel ID	Name	Rank
Gunnels, Chris	Rescue Captain Chris Gunnels	Rescue Captain
Jansky, George	Lieutenant George Jansky	Lieutenant
Murray, Detric	Firefighter/Probatio Detric Murray	Firefighter/Probatio
Taylor, Gaylon	Firefighter/Probatio Gaylon Taylor	Firefighter/Probatio

kv601 TX 6/12/2002 01 648 0 NFIRS - 5
FDID State Incident Date Station Incident Number Exposure Fire Casualty

Injured Person 00420 Male Career Casualty Number
Identification Number Female Volunteer 1
[REDACTED]
First Name MI Last Name Suffix

Age or Date of Birth Date & Time of Injury Response
[REDACTED] OR 6/12/2002 17:35:44 0
Age (in years) Date of Birth Date of Injury Time of Injury # of prior responses
during past 24 hrs.

Usual Assignment Physical Condition Just Prior To Injury
1 Suppression, included are hazmat, rescue, & IC 2 Fatigued
Usual assignment code Condition code
Taken To Severity
1 Hospital 3 Treated by physician, not a lost-time injury
Taken to code Severity code
Activity at Time of Injury
31 Handling charged hose lines
Activity code

Primary Apparent Symptom Cause of Firefighter Injury Object Involved in Injury
03 Breathing difficulty or shortness 7 Overexertion/strain None
Symptom code Cause code Injury
Primary Area of Body Injured Factor Contributing to Injury Object code
32 Chest 21 Fire progress, including smoky c
Primary Area code Factor code

Where Injury Occurred Specific Location Vehicle Type
8 At scene, outside
Location code Specific location code Vehicle code

Injury Location Story Where Injury Occurred
Outside of Structure 0 Below grade

Remarks
[REDACTED] COMPLAINED OF CHEST PAIN AND DIFFICULTY BREATHING

kv501 FDID	TX State	6/12/2002 Incident Date	01 Station	648 Incident Number	0 Exposure	NFIRS - 6 Fire Casualty
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Did protective equipment fail and contribute to the injury?

Yes
 No

Equipment Sequence
Number

Protective Equipment Item

Protective Equipment Problem

Equipment code

Problem code

Equipment Manufacture, Model & Serial Number

Manufacturer:
Model:
Serial Number:

kv501 TX 8/12/2002 01 648 0 NFIRS - 5
 FDC State Incident Date Station Incident Number Exposure Fire Casual

Injured Person Identification Number [Redacted] Casualty Number: 2
 Male Career
 Female Volunteer
 First Name [Redacted] Last Name [Redacted] Suffix [Redacted]

Age or Date of Birth OR Date of Birth 8/12/2002
 [Redacted] OR 8/12/2002
 Age (in years) Date of Birth Date of Injury
 Data & Time of Injury 17:39:04
 Time of Injury
 Responses 0
 # of prior responses during past 24 hrs.

Usual Assignment 1 Suppression, included are hazmat, rescue, & IC
 Usual assignment code
 Physical Condition Just Prior To Injury 2 Fatigued
 Condition code
 Taken To 1 Hospital
 Taken to code
 Severity 3 Treated by physician, not a lost-time injury
 Severity code
 Activity at Time of Injury 31 Handling charged hose lines
 Activity code

Primary Apparent Symptom 85 Dehydration
 Symptom code
 Cause of Firefighter Injury 4 Exposure to hazard
 Cause code
 Object Involved in Injury None
 Primary Area of Body Injured NN None
 Primary Area code
 Factor Contributing to Injury 21 Fire progress, including smoky
 Factor code
 Object code

Where Injury Occurred 8 At scene, outside
 Location code
 Specific Location Specific location code
 Vehicle Type Vehicle code

Injury Location Outside of Structure
 Story Where Injury Occurred 0 Below grade

Remarks
 ROCKY BECAME WEAK WHILE OPERATING A 2 1/2 IN HAND LINE AT THE FRONT OF THE BUILDING

KY501 FDIC	TX State	8/12/2002 Incident Date	01 Station	648 Incident Number	0 Exposate	NFIRS - 5 Fire Casualty
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Did protective equipment fall and contribute to the injury?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Equipment Sequence Number
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Protective Equipment Item	Protective Equipment Problem
Equipment code	Problem code

Equipment Manufacture, Model & Serial Number

Manufacturer:
Model:
Serial Number:

Sullivan Motor") is, and at all times material hereto was, a Texas corporation organized under the laws of the State of Texas and was conducting a business enterprise under the name SULLIVAN MOTOR COMPANY, and may be served through its registered agent for service, Wade Sullivan, at 1030 Loop 304 East, Crockett, Texas 75835. Defendant Sullivan Motor's principal office and principal place of business is located in Crockett, Houston County, Texas.

III. JURISDICTION AND VENUE

6. This Court has jurisdiction over defendants because Defendant Sullivan Motor is a Texas corporation its principal places of business in Houston County, Texas.

7. This Court has jurisdiction over this cause of action because the amount in controversy, exclusive of interest and costs, exceeds the jurisdictional thresholds of this Court.

8. Venue of this cause of action is proper in Houston County, Texas pursuant to TEX. CIV. PRAC. & REM. CODE § 15.002(a)(1) because all or a substantial part of the events or omissions giving rise to the claim occurred in Houston County, Texas.

IV. STATEMENT OF FACTS APPLICABLE TO ALL COUNTS

9. Plaintiffs are the owners of a Ford Expedition believed to have identification number 1FMRU17L6XL [REDACTED] and believed to have license plate number [REDACTED] (Hereinafter the "Ford Expedition").

10. On June 12, 2002 the Ford Expedition was parked in Plaintiffs' airplane hangar when suddenly and unexpectedly the vehicle ignited and burned. The subsequent fire spread throughout the building causing an explosion which resulted in total destruction of the hangar and most of its contents and extensive damage to rest.

11. Defendant Ford designed, manufactured and marketed the Ford Expedition which was in substantially the same condition as when the Expedition left the possession of Ford.

12. Defendant Sullivan Motors advertised and sold the Ford Expedition in question to the Plaintiffs, which was in substantially the same condition as when the Expedition left the possession of Sullivan Motors.

V. ALL COUNTS APPLICABLE TO FORD

COUNT ONE-- STRICT LIABILITY

13. Plaintiffs hereby adopt, restate and re-allege each and every paragraph of the Statement of Facts Applicable to all Counts as if fully and completely set forth herein.

14. Ford is and was at the time of the occurrence in question engaged in the business of designing, manufacturing and marketing sport utility vehicles to the general public, including the Ford Expedition sold to Plaintiffs. Plaintiffs, therefore, invoke the doctrine of strict liability as enunciated in § 402A of the Restatement (Second) of Torts, and by the Supreme Court of Texas.

15. Ford has a duty and had a duty at the time of manufacture of the Expedition in question to design, manufacture and market sport utility vehicles in a responsible and safe way so as not to cause injury or damage to the Plaintiffs or members of the general public.

16. By designing, manufacturing and marketing a defective sport utility vehicle, such as the Expedition at issue here, Ford furnished to Plaintiffs a product which was and is unreasonably dangerous to consumers and to Plaintiffs in particular. The vehicle was defective in that it spontaneously, unexpectedly ignited. Specifically, Ford is strictly liable in the following regards:

- a. The design and manufacture of the Expedition was such that it had a dangerous propensity to ignite;
- b. The Expedition was placed on the market without adequate warning to its users, ultimate users and consumers thereof of the propensities of the Expedition for igniting;

- c. The Expedition was placed on the market without adequate warnings to consumers and Plaintiffs in particular of the tendency of the vehicle to ignite;
- d. The standard of care in the design, development and manufacture of the Expedition which a reasonable prudent manufacturer of the same or similar motor vehicles would have used, under the same or similar circumstances, was not used by Ford;
- e. The testing utilized by Ford to test the Expedition was inadequate;
- f. The Expedition was negligently and improperly designed and manufactured, when Ford knew or should have known that the vehicle was unsafe and would cause irreparable harm and unreasonable risk of harm to Plaintiffs; and
- g. The vehicle was improperly and inadequately tested and inspected by Ford.

17. Plaintiffs allege that the Expedition in question was defective and unsafe for its intended purpose at the time the vehicle left Ford and at the time the Plaintiffs purchased the vehicle in question. The Ford Expedition was defective because it was unreasonably dangerous, in that, it suddenly and unexpectedly ignited.

18. The design, manufacture and marketing of the defective Ford Expedition was a proximate and/or producing cause of all injuries suffered by Plaintiffs as hereinafter more particularly alleged.

COUNT TWO- NEGLIGENCE

19. Plaintiffs hereby adopt, restate and re-allege each and every paragraph of the Statement of Facts Applicable to all Counts as if fully and completely set forth herein.

20. Plaintiffs hereby adopt, restate and re-allege each and every paragraph of Count One as if fully and completely set forth herein.

21. Ford had a duty to design, manufacture and market a vehicle that was safe for use as a passenger vehicle. In its design, manufacture and marketing of the Expedition, Ford breached these duties. Specifically, Ford was negligent in the following regards:

- a. The design and manufacture of the Expedition was such that it had a dangerous propensity to ignite;
 - b. The Expedition was placed on the market without adequate warning to its users, ultimate users and consumers thereof of the propensities of the Expedition for igniting;
 - c. The Expedition was placed on the market without adequate warnings to consumers and Plaintiffs in particular of the tendency of the vehicle to ignite;
 - d. The standard of care in the design, development and manufacture of the Expedition which a reasonable prudent manufacturer of the same or similar motor vehicles would have used, under the same or similar circumstances, was not used by Ford;
 - e. The testing utilized by Ford to test the Expedition was inadequate;
 - f. The Expedition was negligently and improperly designed and manufactured, when Ford knew or should have known that the vehicle was unsafe and would cause irreparable harm and unreasonable risk of harm to Plaintiffs; and
 - g. The vehicle was improperly and inadequately tested and inspected by Ford.
22. The negligence of Ford was a proximate and/or producing cause of all injuries

suffered by Plaintiffs as hereinafter more particularly alleged.

COUNT THREE- MISREPRESENTATION

23. Plaintiffs hereby adopt, restate and re-allege each and every paragraph of the Statement of Facts Applicable to all Counts as if fully and completely set forth herein.

24. Plaintiffs hereby adopt, restate and re-allege each and every paragraph of Counts One through Two of this Petition as if fully and completely set forth herein.

25. Ford, by advertising, made to the public, including Plaintiffs, a misrepresentation of a material fact and/or facts concerning the character and/or quality of the vehicles sold by them, specifically the Expedition, of such a nature as to render them strictly liable for the injuries and damages suffered by Plaintiffs.

26. Ford, acting by and through its agents, engaged in a course of advertising and

promoting their products, which included express and implied misrepresentations of material fact concerning the character and quality of the products sold to Plaintiffs, which included advertising, marketing and promotional activities, the totality of which, taken as a whole, falsely represented the following:

- a. The Expedition is suitable for safe use; and
- b. The Expedition was suitable for use by individuals who were not experienced engineers or with adequate knowledge and understanding electrical functioning of the Ford Expedition.

27. Plaintiffs justifiably relied upon these misrepresentations of material facts when the Ford Expedition at issue was purchased.

28. Ford made these misrepresentations with the intention that they should be acted upon and, in fact, Plaintiffs acted upon these misrepresentations.

29. All of this conduct, under the circumstances of this case, were known by Ford prior to the purchase of the Expedition in question and the vehicle in question and was a proximate and/or producing cause of the damages to Plaintiffs, thus rendering Ford liable to the Plaintiffs under the common law doctrine expressed in Restatement (Second) of Torts § 402B.

COUNT FOUR - RES IPSA

30. Plaintiffs hereby adopt, restate and re-allege each and every paragraph of the Statement of Facts Applicable to all Counts as if fully and completely set forth herein.

31. Plaintiffs hereby adopt, restate and re-allege each and every paragraph of Counts One through Three of this Petition as if fully and completely set forth herein.

32. Plaintiffs cannot more specifically allege the acts of negligence on the part of Defendant Ford, for the reason that the facts in that regard are peculiarly within the knowledge of Defendant Ford, and, in the alternative, in the event Plaintiffs are unable to prove specific acts of negligent manufacture or design, Plaintiffs rely on the doctrine of *res ipsa loquitur*.

33. In this connection, Plaintiffs will show that the manufacture and design of the Ford Expedition were within the exclusive control of Defendant Ford. Plaintiffs have no means of ascertaining the method or manner in which the Ford Expedition was manufactured and designed, and it came into Plaintiffs' possession in the same condition as it was in when it left the control of Defendant Ford. The occurrence causing harm to Plaintiffs, as described above, was one which, in the ordinary course of events, would not have occurred without negligence on the part of Defendant Ford. Thus, Defendant Ford was negligent in the manufacture, design, or both, of the Expedition, which negligence was a proximate cause of Plaintiffs' damages more particularly set forth below.

COUNT FIVE-FRAUDULENT CONCEALMENT

34. Plaintiffs hereby adopt, restate and re-allege each and every paragraph of the Statement of Facts Applicable to all Counts as if fully and completely set forth herein.

35. Plaintiffs hereby adopt, restate and re-allege each and every paragraph of Counts One through Four of this Petition as if fully and completely set forth herein.

36. Ford fraudulently concealed the defective nature of the Expedition from consumers and in particular the Plaintiffs.

37. Ford concealed or failed to disclose material facts within the corporation's knowledge. Furthermore, Ford knew that Plaintiffs were ignorant of these facts and did not have an equal opportunity or ability to discover the truth. Ford intended to induce Plaintiffs and the public to purchase the vehicle in question by concealing or failing to disclose material facts about the vehicle. These misrepresentation and failure to disclose material facts constitutes fraud and was a producing and/or proximate cause of Plaintiffs' damages and injuries.

COUNT SIX - EXEMPLARY DAMAGES

38. Plaintiffs hereby adopt, restate and re-allege each and every paragraph of the Statement of Facts Applicable to all Counts as if fully and completely set forth herein.

39. Plaintiffs hereby adopt, restate and re-allege each and every paragraph of Counts One through Five of this Petition as if fully and completely set forth herein.

40. The aforesaid conduct of Defendant Ford, when viewed objectively from the standpoint of the said Defendant at the time of the aforesaid conduct included an extreme degree of risk, considering the probability and magnitude of the potential harm to others, including Plaintiff.

41. Defendant Ford had actual and subjective awareness of the risk involved, but nevertheless proceeded to engage in the aforesaid conduct with conscious indifference to the rights, safety and/or welfare of others, including that of the Plaintiffs.

VI. ALL COUNTS APPLICABLE TO DEFENDANT SULLIVAN MOTORS

COUNT SEVEN- STRICT LIABILITY

42. Plaintiffs hereby adopt, restate and re-allege each and every paragraph of

the Statement of Facts Applicable to all Counts as if fully and completely set forth herein.

43. Plaintiffs hereby adopt, restate and re-allege each and every paragraph of Counts One through Six of this Petition as if fully and completely set forth herein.

44. Sullivan Motors is and was at the time of the occurrence in question engaged in the business of marketing and selling sport utility vehicles to the general public, including the Ford Expedition sold to Plaintiffs. Plaintiffs, therefore invoke the doctrine of strict liability as enunciated in § 402A of the Restatement (Second) of Torts, and by the Supreme Court of Texas.

45. Sullivan Motors has a duty and had a duty at the time of manufacture of the Expedition in question to market sport utility vehicles in a responsible and safe way so as not to cause injury or damage to the Plaintiffs or members of the general public.

46. By marketing and conveying a defective sport utility vehicle, such as the Expedition at issue here, Sullivan Motors furnished to Plaintiffs a product which was and is unreasonably dangerous to consumers and to Plaintiffs in particular. The vehicle was defective in that it spontaneously, unexpectedly ignited. Specifically Sullivan Motors is strictly liable in the following regards:

- a. Marketing, advertising and conveying an Expedition which had a dangerous propensity to ignite;
- b. Placing the Expedition on the market without adequate warning to its users, ultimate users and consumers thereof of the propensities of the Expedition for igniting;
- c. The standard of care in marketing, advertising and conveying the Expedition which a reasonable prudent manufacturer of the same or similar motor vehicles would have used, under the same or similar circumstances, was not used by Sullivan Motors.
- d. Negligently and improperly marketing, advertising and conveying the Expedition when Sullivan knew or should have known that the vehicle was unsafe and would cause irreparable harm and unreasonable risk of harm to Plaintiffs;

47. Plaintiffs allege that the Expedition in question was defective and unsafe for its intended purpose at the time the vehicle left Sullivan Motors and at the time the Plaintiffs purchased the vehicle in question. The Ford Expedition was defective because it was unreasonably dangerous, in that, it suddenly and unexpectedly ignited.

48. The design, manufacture and marketing of the defective Ford Expedition was a proximate and/or producing cause of all injuries suffered by Plaintiffs as hereinafter more particularly alleged.

COUNT EIGHT- NEGLIGENCE

49. Plaintiffs hereby adopt, restate and re-allege each and every paragraph of the Statement of Facts Applicable to all Counts as if fully and completely set forth herein.

50. Plaintiffs hereby adopt, restate and re-allege each and every paragraph of Count One through Seven as if fully and completely set forth herein.

51. Sullivan Motors had a duty to market advertise and convey a vehicle that was safe for use as a passenger vehicle. In its marketing advertising and conveyance of the Expedition, Sullivan Motors breached these duties. Specifically, Sullivan Motors was negligent in the following regards:

- a. Marketing, advertising and conveying an Expedition which had a dangerous propensity to ignite;
- b. Placing the Expedition on the market without adequate warning to its users, ultimate users and consumers thereof of the propensities of the Expedition for igniting;
- c. The standard of care in marketing, advertising and conveying the Expedition which a reasonable prudent manufacturer of the same or similar motor vehicles would have used, under the same or similar circumstances, was not used by Sullivan Motors.
- d. Negligently and improperly marketing, advertising and conveying the Expedition

when Sullivan knew or should have known that the vehicle was unsafe and would cause irreparable harm and unreasonable risk of harm to Plaintiffs;

52. The negligence of Sullivan Motors was a proximate and/or producing cause of all injuries suffered by Plaintiffs as hereinafter more particularly alleged.

COUNT NINE- MISREPRESENTATION

53. Plaintiffs hereby adopt, restate and re-allege each and every paragraph of the Statement of Facts Applicable to all Counts as if fully and completely set forth herein.

54. Plaintiffs hereby adopt, restate and re-allege each and every paragraph of Counts One through Eight of this Petition as if fully and completely set forth herein.

55. Sullivan Motors, by advertising, made to the public, including Plaintiffs, a misrepresentation of a material fact and/or facts concerning the character and/or quality of the vehicles sold by them, specifically the Expedition, of such a nature as to render them strictly liable for the injuries and damages suffered by Plaintiffs.

56. Sullivan Motors, acting by and through its agents, engaged in a course of advertising and promoting their products, which included express and implied misrepresentations of material fact concerning the character and quality of the products sold to Plaintiffs, which included advertising, marketing and promotional activities, the totality of which, taken as a whole, falsely represented the following:

- a. The Expedition was suitable for safe use; and
- b. The Expedition was suitable for use by individuals who were not experienced engineers or with adequate knowledge and understanding electrical functioning of the Expedition.

57. Plaintiffs justifiably relied upon these misrepresentations of material facts when the Ford Expedition at issue was purchased and when charging the vehicle's battery.

58. Sullivan Motors made these misrepresentations with the intention that they should be acted upon and, in fact, Plaintiffs acted upon these misrepresentations.

59. All of this conduct, under the circumstances of this case, was known by Sullivan Motors prior to the purchase of the Expedition in question and the vehicle in question and was a proximate and/or producing cause of the damages to Plaintiffs, thus rendering Sullivan liable to the Plaintiffs under the common law doctrine expressed in Restatement (Second) of Torts § 402B.

COUNT TEN- RES IPSA

60. Plaintiffs hereby adopt, restate and re-allege each and every paragraph of the Statement of Facts Applicable to all Counts as if fully and completely set forth herein.

61. Plaintiffs hereby adopt, restate and re-allege each and every paragraph of Counts One through Nine of this Petition as if fully and completely set forth herein.

62. Plaintiffs cannot more specifically allege the acts of negligence on the part of Defendant Sullivan Motors, for the reason that the facts in that regard are peculiarly within the knowledge of Defendant Sullivan Motors, and, in the alternative, in the event Plaintiffs are unable to prove specific acts of negligent manufacture or design, Plaintiffs rely on the doctrine of *res ipsa loquitur*.

63. In this connection, Plaintiffs will show that the sale of the Ford Expedition was within the exclusive control of Defendant Sullivan Motors. Plaintiffs have no means of ascertaining the condition in which the Ford Expedition was sold, and it came into Plaintiffs' possession in the same condition as it was in when it left the control of Defendant Sullivan Motors. The occurrence causing harm to Plaintiffs, as described above, was one which, in the ordinary course of events, would not have occurred without negligence on the part of Defendant Sullivan. Thus, Defendant Sullivan was negligent in the sale of the Expedition, which negligence was a proximate cause of Plaintiffs' injuries and damages, more particularly set forth below.

COUNT ELEVEN- FRAUDULENT CONCEALMENT

64. Plaintiffs hereby adopt, restate and re-allege each and every paragraph of the Statement of Facts Applicable to all Counts as if fully and completely set forth herein.

65. Plaintiffs hereby adopt, restate and re-allege each and every paragraph of Counts One through Ten of this Petition as if fully and completely set forth herein.

66. Sullivan Motors fraudulently concealed the defective nature of the Expedition from consumers and in particular the Plaintiffs.

67. Sullivan Motors concealed or failed to disclose material facts within the corporation's knowledge. Furthermore, Sullivan Motors knew that Plaintiffs were ignorant of these facts and did not have an equal opportunity or ability to discover the truth. Sullivan Motors intended to induce Plaintiffs and the public to purchase the vehicle in question by concealing or failing to disclose material facts about the vehicle. These misrepresentation and failure to disclose material facts constitutes fraud and was a producing and/or proximate cause of Plaintiffs' damages.

COUNT TWELVE-- EXEMPLARY DAMAGES

68. Plaintiffs hereby adopt, restate and re-allege each and every paragraph of the Statement of Facts Applicable to all Counts as if fully and completely set forth herein.

69. Plaintiffs hereby adopt, restate and re-allege each and every paragraph of Counts One through Eleven of this Petition as if fully and completely set forth herein.

70. The aforesaid conduct of Defendant Sullivan, when viewed objectively from the standpoint of the said Defendant at the time of the aforesaid conduct included an extreme degree of risk, considering the probability and magnitude of the potential harm to others, including Plaintiff.

71. Defendant Sullivan had actual and subjective awareness of the risk involved, but nevertheless proceeded to engage in the aforesaid conduct with conscious indifference to the rights, safety and/or welfare of others, including that of the Plaintiffs.

VII PRODUCING AND PROXIMATE CAUSE APPLICABLE TO ALL COUNTS

72. Each and every one of the foregoing acts and omissions of FORD MOTOR COMPANY and SULLIVAN MOTOR COMPANY, respectively, as herein above particularly set forth in counts One through Twelve, and each of said counts, taken singularly or in any combination, constitute a direct, producing and proximate cause of the injuries and damages suffered and sustained by Plaintiffs as hereinafter more particularly alleged.

VIII DAMAGES APPLICABLE TO ALL COUNTS

73. Plaintiffs hereby adopt and re-allege each and every Paragraph of the Statement Of Facts Applicable To All Counts as if fully copied and set forth at length herein.

74. Plaintiffs hereby adopt and re-allege each and every Count of this Petition as if fully copied and set forth at length herein.

75. As a proximate and/or producing result of Defendants' conduct and/or defective product and services, Plaintiff has suffered sustained and incurred, and in reasonable probability will continue to suffer, sustain and incur the following injuries and damages, among others:

- (a) Value of contents of hangar;
- (b) Loss of anticipated profits from different businesses;
- (c) Loss of goodwill; and
- (d) Pre-judgment and post-judgment interest.

76. WHEREFORE, Plaintiffs pray that Defendants be cited to answer and appear herein, and that upon final trial, Plaintiffs have, among other things:

- (a) Judgment against Defendants, jointly and severally, for compensatory damages in excess of the minimum jurisdictional limits of the Court;
- (b) Pre-judgment interest in accordance with Texas law;

- (c) Post-judgment interest in accordance with Texas law;
- (d) Costs of Court;
- (e) Such other and further relief to which Plaintiffs show themselves justly entitled to receive.

Respectfully submitted,

HOUSSIERE, DURANT & HOUSSIERE, L.L.P.

By: 

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June 21, 2002

Ms. Shawna Norton
Ford Motor Company
Office of the General Counsel
Parklane Towers West, Suite 300
Three Parklane Boulevard
Dearborn, MI 48126-2568

FOR
JUN 21 2002
OFFICE OF THE
GENERAL COUNSEL

*New
(Shawn)*

VIA FACSIMILE 313-322-3269

RE: Insured: [REDACTED]
Date of Loss: 6/12/02
Claim Number: [REDACTED]

Dear Ms. Norton:

I am writing to advise you of a fire, which occurred June 12, 2002 in Crockett, Texas, on premises owned by our insured, [REDACTED] Service. This fire caused the complete destruction of a building and personal property contained therein. On behalf of Travelers Property Casualty Corp., I am conducting an investigation into the cause and origin of the fire for subrogation purposes. Early indications are that the fire originated in a 1999 Ford Expedition, serial number 1FMRU17L6X1 [REDACTED]. I am advising you of this loss so you can conduct an investigation into the origin as soon as possible, as our insured is anxious to remove the debris and begin the process of rebuilding his facility.

Currently, the vehicle is located at [REDACTED] Service in Crockett, TX. If representatives from your company wish to examine the vehicle at the fire scene, they should begin making these arrangements very soon. I will assist in arranging these inspections if necessary.

Yours truly,

Richard A. Crawford
Richard A. Crawford

cc: Scott Dau
M. Dean Solomon

ENR3-005-101-25002

DIANA ZAL...
IN THE COMMON PLEAS COURT
2004 SEP 15 PM 12:08
SUMMIT COUNTY, OHIO

SUMMIT COUNTY
CLERK OF COURTS

CASE NO: 2004-04-2009

JUDGE: ASSIGNED TO JUDGE HUNTER

[REDACTED]
Cleveland, Ohio [REDACTED]

Plaintiff,

v.

GELLER LEASING INC.
c/o JEFFERY T. KNOLL
Statutory Agent
76 S. Main Street, #1512
Akron, Ohio 4444308

FORD MOTOR CORP.
c/o CT CORP. SYSTEM
Statutory Agent
1300 East 9th Street
Cleveland, Ohio 44114

JOHN DOE 1-3
(Identities and address presently unknown
and unavailable)

Defendants.

COMPLAINT

Now comes Plaintiff Ins. Co., by and through counsel, and avers as follows:

1. At all times material, Plaintiff Ins. Co. was the insurer, assignee and subrogee of [REDACTED] (Plaintiff's insured).
2. Defendant Geller Leasing, Inc., at all times material herein is and was a corporation or business entity doing business in the state of Ohio and engaged in the service, repair, distribution, sale of motor vehicles.
3. Defendant Ford Motor Co. at all times material herein is and was a corporation or business entity doing business in the state of Ohio and engaged in the formulation, manufacture, design, service, repair, distribution, and sale of motor vehicles.

4. At all times material herein, Defendants John Doe 1-3, whose identities and addresses are not readily ascertainable and are presently unknown, negligently performed any repairs and/or maintenance on the vehicle in question, whether through their employment with Defendant Geller and/or Defendant Ford and/or Defendant John Doe.

5. On or about March 27, 2002, Plaintiff's insured purchased a 1998 Lincoln Navigator 4x4, VIN [REDACTED] from Defendant Geller Leasing Inc.

6. On or about April 4, 2002, the aforementioned vehicle was parked and unoccupied the vehicle caught fire due to an electrical shorting.

COUNT I

7. Plaintiff reavers and realleges the allegations contained in paragraphs 1 through 6 as if fully rewritten and incorporated herein.

8. Defendant General Motors negligently formulated, designed, manufactured, and/or installed certain parts of the vehicle which ultimately caused the motor vehicle to catch fire.

9. The failure and/or malfunction of the vehicle were foreseeable to Defendant.

10. As a direct and proximate result of the negligence of Defendant General Motors, Plaintiff's insured's vehicle was damaged in the total net amount of \$22,952.25, which takes into account any towing, storage, car rental, or salvage, where applicable.

11. As a result of Defendant General Motors' negligence, pursuant to a policy of insurance, Plaintiff Insurance Co. was required to and did pay to or on behalf of its insured the sum of \$22,702.25.

COUNT II

12. Plaintiff reavers and realleges the allegations contained in paragraphs 1 through 11 as if fully rewritten and incorporated herein.

13. Defendant Geller breached the express and/or implied warranty of merchantability that the vehicle was fit for its purpose when it sold the Plaintiff's insured the Navigator.

14. Defendant Geller knew or should have known that the vehicle was defective at the time of the sale to Plaintiff's insured.

15. Defendant Geller contracted to have the vehicle serviced and/or repaired prior to its sale of the vehicle to Plaintiff's insured and such service and/or repair was negligent.

16. Defendant Geller's breach of warranty, express or implied, constituted negligence.

17. As a direct and proximate result of the negligence of Defendant Geller, Plaintiff's insured's vehicle was damaged in the total net amount of \$22,952.25, which takes into account any towing, storage, car rental, or salvage, where applicable.

18. As a result of Defendant Geller's negligence, pursuant to a policy of insurance, Plaintiff Insurance Co. was required to and did pay to or on behalf of its insured the sum of \$22,702.25.

WHEREFORE, Plaintiff demands judgment against the Defendants, jointly and severally, in the amount of \$22,702.25 and all costs herein.



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