



U.S. Department of Transportation  
National Highway Traffic Safety Administration

**DOT Auto Safety Hotline**  
**Vehicle Owner's Questionnaire**  
To Report Vehicle Safety Defects  
1-888-DASH-2-DOT  
(1-888-327-4236)  
INTERNET: www.nhtsa.dot.gov/hotline

FOR AGENCY USE ONLY 100146

Date Received: FEB 27 2003  
OFFICE OF PUBLIC INFORMATION  
Telephone Number  
Evening Telephone Number

Repository   
Reference No. 10001819

**OWNER INFORMATION (Type or Print)**

Name: [REDACTED]  
Address: [REDACTED]  
City: DUBLIN State: OH Zip Code: [REDACTED]

Do you authorize NHTSA to provide a copy of this report to the manufacturer of your vehicle?  YES  NO  
In the absence of an authorization, NHTSA WILL NOT provide your name or address to the vehicle manufacturer.  
Signature of Owner \_\_\_\_\_ Date: 1/1

**VEHICLE INFORMATION**

17 digit Vehicle Identification Number: [REDACTED] Make: MERCURY Model: VILLAGER Model Year: 1995  
Date Purchased: \_\_\_\_\_ Dealer's Name and Telephone Number: \_\_\_\_\_ Engine: \_\_\_\_\_ Fuel Type: \_\_\_\_\_  
Original Owner:  Dealer's City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
Transmission Type: \_\_\_\_\_  Antilock Brakes Powertrain: \_\_\_\_\_ Vehicle Component Code: 136100 VISIBILITY:WINDSHIELD WIPER/WASHER:SWITCH/WIRING  
 Cruise Control Multiple Failure: \_\_\_\_\_

**FAILED COMPONENT(S)/PART(S) INFORMATION**

Incident Date(s): 22-NOV-2002 Failure Mileage: 45K 910 90K Failure Speed: \_\_\_\_\_

**ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A TIRE FAILURE**

Tire Make: \_\_\_\_\_ Tire Model (Name or Number): \_\_\_\_\_ Tire Size (Example P215/65R15): \_\_\_\_\_  
DOT No. (Example: DOTMALSABC036)  Original Equipment  Prior Repair Failure Location: \_\_\_\_\_  
Tire Component Code: \_\_\_\_\_ Tire Failure Type: \_\_\_\_\_

**ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A CHILD SEAT FAILURE**

Make: \_\_\_\_\_ Date Manufactured: \_\_\_\_\_ Model No./Name: \_\_\_\_\_  
Seat Type: \_\_\_\_\_ Installation System: \_\_\_\_\_  
Child Seat Component Code: \_\_\_\_\_ Failed Part: \_\_\_\_\_

**APPLICABLE INCIDENT INFORMATION**

(Please describe in detail the incident(s), failure(s), crash(es), and injury(ies).)

Crash  Yes  No Fire  Yes  No Number of Persons Injured: \_\_\_\_\_ Number of Deaths: \_\_\_\_\_ Reported to Police: N

Narrative Description of Incident(s), Crash(es), and Injury(ies).  
Please describe (1) events leading up to the failure, (2) failure and its consequences, and (3) what was done to correct the failure; i.e., parts repaired or replaced (and if old part is available).

CONTROL SWITCH FOR THE WINDSHIELD WIPERS DOES NOT WORK, DEFECT CONTROL SWITCHES THE NAME OF THE BUTTON. TS

WASHER FLUID.

THIS IS THE SECOND DEFECTIVE CONTROL SWITCH.  
THE LOCAL MERCURY DEALER SAYS THIS HAS BEEN  
A COMMON PROBLEM.

Include, if available: Police/Fire Department Report, Photos, and Repair Invoice. ATTACH ADDITIONAL SHEETS IF NECESSARY.

The Privacy Act of 1974 (Public Law 93-579) This information is requested pursuant to authority vested in the National Highway Traffic Safety Act and subsequent amendments. You are under no obligation to respond to this questionnaire. Your response may be used to assist the NHTSA in determining whether a Manufacturer...