



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 1368

Date Received  
2003 AUG -1 PM 2:15  
09-JUL-2003

Repository   
Reference No.  
10026864

**OWNER INFORMATION (Type or Print)**

Name [Redacted]  
Address [Redacted]  
City SLIDELL State LA Zip Code [Redacted]

Daytime Telephone Number [Redacted] E-mail Address [Redacted]  
Evening Telephone Number [Redacted]

Do you authorize NHTSA to provide a copy of this report to the manufacturer of your vehicle?  YES  NO  
In the absence of [Redacted] name or address to the vehicle manufacturer.  
Signature of Owner [Redacted] Date 7/24/03

**VEHICLE INFORMATION**

17 digit Vehicle Identification Number Located at bottom of windshield on driver's side [Redacted]  
Make LINCOLN Model TOWN CAR Model Year 1995

Date Purchased 5-21-96 Dealer's Name and Telephone Number DUB HERRING FORD, INC. 601-799-8682 Engine: 4.6 LTR Fuel Type: GAS  
Original Owner [Redacted] Dealer's City PISCATAWAY, MISS 39466 State Zip Code 1-8 No. Cylinders 8

Transmission Type 3 SPEED OVERDRIVE  Antilock Brakes Powertrain Vehicle Component Code 036000 SERVICE BRAKES, HYDRAULIC:ANTILOCK  
 Cruise Control Multiple Failure: 1

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

Incident Date(s) 04-JUL-2003 Failure Mileage 63000 Failure Speed 42 MPH. ANTI LOCK BRAKES

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

Tire Make [Redacted] Tire Model (Name or Number) [Redacted] Tire Size (Example P215/65R15) [Redacted]  
DOT No. (Example: DOTM123ABC036)  Original Equipment  Prior Repair Failure Location: [Redacted]  
Tire Component Code [Redacted] Tire Failure Type [Redacted]

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

Make: [Redacted] Date Manufactured: [Redacted] Model No./Name: [Redacted]  
Seat Type: [Redacted] Installation System: [Redacted]  
Child Seat Component Code: [Redacted] Failed Part: [Redacted]

**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 2 Number of Deaths [Redacted] Reported to Police Y

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

CONSUMER STATED THAT WHILE DRIVING AND WITHOUT WARNING ABS FAILED, CAUSING THE PEDAL TO GO TO THE FLOOR AND AN ACCIDENT, DEALER NOTIFIED. \*AK of 've had a history of bad brakes with this car since I've had it. I've taken it in for repairs 3 times + each time it has come back to me in the same condition. The brakes will kick back make a loud noise, then go to the floor. (no brakes) On the Hwy (July 1st) Car #1 gave a sudden signal to make a left turn of hit my brakes they kicked back & went to the floor I could not stop and several to the right as I would not hit them directly in the back. This does not happen all the time Very unpredictable.

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

The Privacy Act of 1974 (Public Law 93-579) This information is requested pursuant to authority vested in the National Highway Traffic Safety Act and subsequent amendments. You are under no obligation to respond to this questionnaire. Your response may be used to assist the NHTSA in determining whether a Manufacturer should take appropriate action to correct a safety defect. If the NHTSA proceeds with administrative enforcement or litigation against a manufacturer, your response, or a statistical summary thereof, may be used in support of the agency's action.

Narrative Description of Incident(s), Failure(s), Crash(es), and Injury(ies)

Shield Ford Lincoln Mercury did not follow the guidelines or replacement required by Ford Motor Co. Displacement may be due to the mileage, should have been covered under the bumper to bumper warranty coverage.

Spoke with representatives of Ford Motor Company, home office and established the fact that, Shield, Ford Lincoln Mercury did not follow or go by the bulletin's procedures for correcting this problem. And, should not have been charged \$800.00 dollars for the work performed and not corrected.

(BLANE - FORD MOTOR COMP.) - 1-800-812-8183 (REF# 625481893)  
REPORT TO FORD

ATTACH ADDITIONAL SHEETS IF NECESSARY

U.S. Department of Transportation

National Highway Traffic Safety Administration

400 Seventh St., S.W. Washington, D.C. 20590

Official Business Penalty for Private Use \$300



NO POSTAGE NECESSARY IF MAILED IN THE UNITED STATES

**BUSINESS REPLY MAIL**  
FIRST CLASS PERMIT NO 73179 WASHINGTON, D.C.

POSTAGE WILL BE PAID BY NATL. HWY. TRAFFIC SAFETY ADMIN.

U.S. Department of Transportation  
National Highway Traffic Safety Administration  
Office of Defects Investigation, NVS-216  
400 7th Street, SW  
Washington, DC 20590



**VEHICLE OWNER'S QUESTIONNAIRE**

**DOT AUTO SAFETY HOTLINE**

TO REPORT VEHICLE SAFETY DEFECTS  
COMPLETE THIS FORM  
OR

**DASH2DOT**

and dial toll free at

**1-888-DASH-2-DOT**

**1-888-327-4236**

DOT Auto Safety Hotline  
(DASH) 2 DOT



U.S. Department of Transportation  
National Highway Traffic Safety Administration  
www.nhtsa.gov

TOTAL NUMBER OF VEHICLES INVOLVED 02

STATE OF LOUISIANA UNIFORM MOTOR VEHICLE ACCIDENT/TRAFFIC CRASH REPORT



LIC. 30,272,1

LEAD. 09,28423

\*2968403\*

PAGE #

012

DATE OF CRASH 09 04 2003 TIME (0000) 1200 DISTRICTS

IN PARISH OF ST TAMMANY PARISH CODE 52

ON PRIMARY ROADWAY US 11

MILEPOST 011.5 CITY OR TOWN

DISTANCE 0002.0 MILES 5 NE STREET-HIGHWAY LA 423

DISTANCE MILES NE STREET-HIGHWAY

CRASH OCCURRED ON A. INTERSTATE B. U.S. HWY C. STATE HWY D. RURAL ROAD E. CITY STREET F. PRIVATE PROPERTY G. TOLL ROAD H. OTHER

VEHICLE #01 A. PASSENGER CAR B. LT. TRUCK (P.U., ETC.) C. VAN D. A, B, OR C WITH TRAILER E. MOTORCYCLE F. PEDALCYCLE G. OFF-ROAD VEHICLE H. EMERGENCY VEHICLE I. SCHOOL BUS J. OTHER BUS K. MOTOR HOME L. SINGLE UNIT TRUCK M. TRUCK WITH TRAILER N. FARM EQUIPMENT O. OTHER

YEAR 1995 MAKE LINCOLN MODEL TOWN-CAR

VIN 1LNLM81W40Y [REDACTED] VEHICLE TOWED A YES B NO C LEFT AT SCENE REMOVED BY CONVEY

LICENSE PLATE 2004 LA [REDACTED] TYPE PRIVATE REASON TOWED A. VEHICLE DAMAGE B. DRIVER ARRESTED C. TRAFFIC VIOLATION D. OTHER

TRAILER DESCRIPTION NONE YEAR NONE STATE NONE NUMBER NONE LICENSE PLATE NONE

DRIVER'S NAME (LAST, FIRST, MI) [REDACTED] DATE OF BIRTH [REDACTED]

STREET ADDRESS [REDACTED] CITY SLACK STATE LA ZIP [REDACTED]

STATE CLASS ENDORSEMENTS DRIVER'S LICENSE NUMBER LA E [REDACTED] TRANSPORTED TO MEDICAL FACILITY A YES B NO C. URGENT B. NO D. REFUSED AD

OWNER'S NAME (LAST, FIRST, MI OR COMPANY NAME) [REDACTED] SAME AS DRIVER? X YES NO

STREET ADDRESS [REDACTED] CITY [REDACTED] STATE [REDACTED] ZIP [REDACTED] 49-10 FURNISHED? YES NO PROOF OF INSURANCE X YES NO NOTICE OF VIOLATION YES NO

OCCUPANT'S NAME (LAST, FIRST, MI) NONE

STREET ADDRESS [REDACTED] CITY [REDACTED] STATE [REDACTED] ZIP [REDACTED] TRANSPORTED TO MEDICAL FACILITY A YES B NO C. URGENT B. NO D. REFUSED AD

INVESTIGATING AGENCY LSPC NAME OF AGENCY TIME OF NOTIFICATION 120 TIME OF ARRIVAL 1220 TIME ALL LINES OPENED 1220 INVESTIGATOR COMPLETE X YES NO INVESTIGATING POLICE AGENCY A A. STATE B. CITY C. PARISH D. OTHER REPORT COMPLETED 09042003

INVESTIGATING OFFICER'S NAME (PRINT) THE LOY CANNON SUPERVISOR'S INITIALS 001845

TOTAL NUMBER OF VEHICLES INVOLVED 3  
VEHICLE # 09221

A. PASSENGER CAR UNIFORM MOTOR VEHICLE  
B. LT. TRUCK (FL, ETC) F. PEDESTRIAN  
C. VAN G. OFF-ROAD VEHICLE K. MOTOR HOME  
D. A, B, OR C WITH TRAILER H. EMERGENCY VEHICLE L. SINGLE UNIT TRUCK  
M. TRUCK WITH OTHER BUS WASH BUS WITH COMPL



LONG - 89, 78183

|                 |      |             |      |               |   |       |   |            |   |         |   |         |   |         |    |         |    |
|-----------------|------|-------------|------|---------------|---|-------|---|------------|---|---------|---|---------|---|---------|----|---------|----|
| YEAR OF VEHICLE | 2003 | TIME (DDMM) | 1200 | DISTRICT ZONE | 4 | TROOP | 4 | COVERED BY | 1 | OFFICER | 1 | # DOORS | 2 | # AXLES | 02 | # TIRES | 04 |
|-----------------|------|-------------|------|---------------|---|-------|---|------------|---|---------|---|---------|---|---------|----|---------|----|

ON PRIMARY ROADWAY  
LICENSING PLATE: [REDACTED]  
TYPE: PRIVATE  
A. VEHICLE DAMAGE  
B. DRIVER ARRESTED  
C. INSURANCE VIOLATION  
D. OTHER

MILEPOST: 0.1  
CITY OR TOWN: [REDACTED]  
YEAR: 03  
MAKE: NONE  
TYPE: [REDACTED]  
YEAR: [REDACTED]  
STATE: [REDACTED]  
NUMBER: [REDACTED]  
CRASH OCCURRED ON: [REDACTED]

DRIVER'S NAME (LAST, FIRST, MI OR COMPANY NAME): [REDACTED]  
CLASS ENDORSEMENTS: NONE  
DRIVER'S LICENSE NUMBER: [REDACTED]  
STREET ADDRESS: 1832 [REDACTED] 22, 46  
CITY: [REDACTED]  
STATE: LA  
ZIP: 70002

VEHICLE CLASSIFICATION: PASSENGER CAR  
YEAR: 2003  
MAKE: [REDACTED]  
MODEL: [REDACTED]  
TYPE: PRIVATE

VEHICLE IDENTIFICATION NUMBER (VIN): [REDACTED]  
VEHICLE TYPE: PASSENGER CAR  
PROOF OF INSURANCE: YES  
NOTICE OF VIOLATION ISSUED: YES

DRIVER'S NAME (LAST, FIRST, MI OR COMPANY NAME): [REDACTED]  
CLASS ENDORSEMENTS: NONE  
DRIVER'S LICENSE NUMBER: [REDACTED]  
STREET ADDRESS: [REDACTED]  
CITY: [REDACTED]  
STATE: LA  
ZIP: [REDACTED]

DRIVER'S NAME (LAST, FIRST, MI OR COMPANY NAME): [REDACTED]  
CLASS ENDORSEMENTS: NONE  
DRIVER'S LICENSE NUMBER: [REDACTED]  
STREET ADDRESS: [REDACTED]  
CITY: [REDACTED]  
STATE: LA  
ZIP: [REDACTED]

DRIVER'S NAME (LAST, FIRST, MI OR COMPANY NAME): [REDACTED]  
CLASS ENDORSEMENTS: NONE  
DRIVER'S LICENSE NUMBER: [REDACTED]  
STREET ADDRESS: [REDACTED]  
CITY: [REDACTED]  
STATE: LA  
ZIP: [REDACTED]

DRIVER'S NAME (LAST, FIRST, MI OR COMPANY NAME): [REDACTED]  
CLASS ENDORSEMENTS: NONE  
DRIVER'S LICENSE NUMBER: [REDACTED]  
STREET ADDRESS: [REDACTED]  
CITY: [REDACTED]  
STATE: LA  
ZIP: [REDACTED]

DRIVER'S NAME (LAST, FIRST, MI OR COMPANY NAME): [REDACTED]  
CLASS ENDORSEMENTS: NONE  
DRIVER'S LICENSE NUMBER: [REDACTED]  
STREET ADDRESS: [REDACTED]  
CITY: [REDACTED]  
STATE: LA  
ZIP: [REDACTED]

DRIVER'S NAME (LAST, FIRST, MI OR COMPANY NAME): [REDACTED]  
CLASS ENDORSEMENTS: NONE  
DRIVER'S LICENSE NUMBER: [REDACTED]  
STREET ADDRESS: [REDACTED]  
CITY: [REDACTED]  
STATE: LA  
ZIP: [REDACTED]

DRIVER'S NAME (LAST, FIRST, MI OR COMPANY NAME): [REDACTED]  
CLASS ENDORSEMENTS: NONE  
DRIVER'S LICENSE NUMBER: [REDACTED]  
STREET ADDRESS: [REDACTED]  
CITY: [REDACTED]  
STATE: LA  
ZIP: [REDACTED]

DRIVER'S NAME (LAST, FIRST, MI OR COMPANY NAME): [REDACTED]  
CLASS ENDORSEMENTS: NONE  
DRIVER'S LICENSE NUMBER: [REDACTED]  
STREET ADDRESS: [REDACTED]  
CITY: [REDACTED]  
STATE: LA  
ZIP: [REDACTED]

DRIVER'S NAME (LAST, FIRST, MI OR COMPANY NAME): [REDACTED]  
CLASS ENDORSEMENTS: NONE  
DRIVER'S LICENSE NUMBER: [REDACTED]  
STREET ADDRESS: [REDACTED]  
CITY: [REDACTED]  
STATE: LA  
ZIP: [REDACTED]

INVESTIGATING OFFICER'S NAME (PRINT): The Log Company  
SIGNATURE: [Signature]  
SUPERVISOR'S NAME: [Signature]

VEHICLE #02

|                            |                      |                      |                          |
|----------------------------|----------------------|----------------------|--------------------------|
| A. PASSENGER CAR           | E. MOTORCYCLE        | L. SCHOOL BUS        | M. TRUCK WITH TRAILER(S) |
| B. (T) TRUCK (SAL, ETC)    | F. PEDALCYCLE        | J. OTHER BUS         | N. FARM EQUIPMENT        |
| C. VAN                     | G. OFF-ROAD VEHICLE  | K. MOTOR HOME        | O. OTHER                 |
| D. A, B, OR C WITH TRAILER | H. EMERGENCY VEHICLE | L. SINGLE UNIT TRUCK |                          |

PAGE # 02

YEAR: 1998 MAKE: GMC MODEL: JIMMY DOORS: 2 SEATS: 02 TYPED: 04

VIN: 1G7ZS1G000K [REDACTED] VEHICLE TOWED: 6 A. YES B. NO C. LEFT AT SCENE REMOVED BY: [REDACTED]

YEAR: 2002 STATE: AL NUMBER: UL9X6E TYPE: PRIVATE REASON TOWED: A. VEHICLE DAMAGE B. DRIVER ARRESTED C. INSURANCE VIOLATION D. OTHER

TRAILER DESCRIPTION: NONE YEAR: [REDACTED] MAKE: NONE TYPE: [REDACTED] YEAR: [REDACTED] STATE: [REDACTED] NUMBER: [REDACTED]

DRIVER'S NAME (LAST, FIRST, MI): [REDACTED] DATE OF BIRTH: 12/02/1961

STREET ADDRESS: [REDACTED] TELEPHONE: [REDACTED]

CITY: SLACK STATE: GA ZIP: [REDACTED]

STATE: CLASS ENDORSEMENTS: [REDACTED] DRIVER'S LICENSE NUMBER: [REDACTED] EMPLOYER TO BE REPORTED: X YES [ ] NO

DRIVER'S NAME (LAST, FIRST, MI OR COMPANY NAME): [REDACTED] NAME OF EMPLOYER: S.A.H.

STREET ADDRESS: [REDACTED] CITY: [REDACTED] STATE: [REDACTED] ZIP: [REDACTED]

OCCUPANT'S NAME (LAST, FIRST, MI): [REDACTED] DATE OF BIRTH: 04/20/1960

STREET ADDRESS: Same As Driver CITY: [REDACTED] STATE: [REDACTED] ZIP: [REDACTED]

| SEATING POSITION                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | SECTION                                                                     | TRAPPED OR EJECTED?                                               | REINACT                                                                                                   | OCCUPANT PROTECTION SYSTEM USED                                                                                                                                                                                                                   | INJURY                                                                                                                |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------|-------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------|
| A - FRONT SEAT-LEFT SIDE (MOTORCYCLE DRIVER)<br>B - FRONT SEAT-MIDDLE<br>C - FRONT SEAT-RIGHT SIDE<br>D - SECOND ROW-LEFT SIDE (MOTORCYCLE PASSENGER)<br>E - SECOND ROW-MIDDLE<br>F - SECOND ROW-RIGHT SIDE<br>G - THIRD ROW-LEFT SIDE (MOTORCYCLE PASSENGER)<br>H - THIRD ROW-MIDDLE<br>I - THIRD ROW-RIGHT SIDE<br>J - BLEED-THROUGH OF ONE (SEAT)<br>K - PASSENGER IN OTHER ENCLOSED PASSENGER OR GARAGE AREA (NON-TRAILER UNIT)<br>L - PASSENGER IN OTHER ENCLOSED PASSENGER OR GARAGE AREA (NON-TRAILER UNIT)<br>M - PASSENGER ON TRUCK OR STREET CAR<br>N - TRAILER UNIT<br>O - OTHER OR UNKNOWN SECTION (NON-TRAILER UNIT)<br>P - UNKNOWN | A - NOT SEATED<br>B - TOTALLY SEATED<br>C - PARTIALLY SEATED<br>D - UNKNOWN | A - NOT TRAPPED<br>B - IMPALEMENTED<br>C - TRAPPED<br>D - UNKNOWN | A - EMPLOYED<br>B - NOT EMPLOYED<br>C - NOT EMPLOYED - AWAY FROM OFF<br>D - NOT APPLICABLE<br>E - UNKNOWN | A - NONE USED-VEHICLE OCCUPANT<br>B - SHOULDER BELT ONLY USED<br>C - LAP BELT ONLY USED<br>D - SHOULDER AND LAP BELT USED<br>E - CHILD SAFETY SEAT, IMPROPERLY TIED<br>F - CHILD SAFETY SEAT USED<br>G - HELMET USED<br>H - RESTRAINT USE UNKNOWN | A - FIBEL<br>B - INCAPACITATED/SEVERE<br>C - NON-INCAPACITATED / NO DAMAGE<br>D - POWERFUL COMPLAINT<br>E - NO INJURY |

| INSURANCE VEHICLE #1                                             |                           | INSURANCE VEHICLE #2                      |                  |
|------------------------------------------------------------------|---------------------------|-------------------------------------------|------------------|
| INSURANCE CO. NAME (NOT AGENCY NAME): HARTFORD FIRE & MARINE CO. | EFFECTIVE DATE: 5-21-03   | INSURANCE CO. NAME (NOT AGENCY NAME): AIG | EFFECTIVE DATE:  |
| POLICY NUMBER: DAD403823                                         | EXPIRATION DATE: 11-31-03 | POLICY NUMBER:                            | EXPIRATION DATE: |
| AGENT'S NAME: LUKATEL                                            | PHONE #:                  | AGENT'S NAME:                             | PHONE #:         |
| AGENT'S ADDRESS:                                                 |                           | AGENT'S ADDRESS:                          |                  |

EMERGENCY SERVICES: X AMBULANCE 1220 1225 0105 0120 X RESCUE UNIT 1220 1229

AMBULANCE SERVICE: ACADIAN

FIRE DEPARTMENT: Fire Dept # 1

STATE OF LOUISIANA  
UNIFORM MOTOR VEHICLE TRAFFIC CRASH REPORT  
CONTRIBUTING FACTORS AND CONDITIONS

COMPUTER NUMBER

PAGE #

296872

03

L-2276-03

WRITE APPROPRIATE LETTER IN BLOCK

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                                                                                                                                                                                                                                                                                                                                                                                 |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <p><b>ROAD SURFACE</b><br/>(ONE PER COLUMN)</p> <p>A. ASPHALT<br/>B. WET<br/>C. BRICK/PAVEMENT<br/>D. ICE<br/>E. CONTAMINANT (GREASE, OIL, ETC.)<br/>F. UNUSUAL<br/>G. OTHER</p> <p>A. CONCRETE<br/>B. BLACK TOP<br/>C. BRICK<br/>D. GRAVEL<br/>E. DIRT<br/>F. UNUSUAL<br/>G. OTHER</p>                                                                                                                                                                                                                                                                                                                              | <p><b>ROADWAY CONDITIONS</b></p> <p>A. NO DEFECTS<br/>B. DEFECTIVE SHOULDER<br/>C. HOLES<br/>D. DEEP RUTS<br/>E. BUMPS<br/>F. LOOSE SURFACE MATERIAL<br/>G. CONSTRUCTION BARRIERS<br/>H. OVERHEAD CLEARANCE LIMITED<br/>I. CONSTRUCTION - NO WARNING<br/>J. PREVIOUS CRASH<br/>K. FLOODING<br/>L. ANIMAL IN ROADWAY<br/>M. OBSTRUCTED ROADWAY<br/>N. OTHER DEFECTS</p>                                                                                                                                                                              | <p><b>LIGHTING</b></p> <p>A. DARK<br/>B. DARK - NO STREET LIGHTS<br/>C. DARK - CONTINUOUS STREET LIGHT<br/>D. DARK - STREET LIGHT AT INTERSECTION ONLY<br/>E. DAZE<br/>F. DAWN<br/>G. UNUSUAL</p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | <p><b>KIND OF LOCATION</b></p> <p>A. MANUFACTURING OR INDUSTRIAL<br/>B. BUSINESS CONTINUOUS<br/>C. BUSINESS, MAJOR RESIDENTIAL<br/>D. RESIDENTIAL DISTRICT<br/>E. RESIDENTIAL SCATTERED<br/>F. SCHOOL OR PLAYGROUND<br/>G. OPEN COUNTRY<br/>H. OTHER</p>                                                                                                                                                                                                                                                                                                                 | <p><b>PRIMARY FACTOR</b></p> <p>A. VIOLATION<br/>B. MOVEMENT PRIOR TO CRASH<br/>C. VISION OBSCUREMENTS<br/>D. CONDITION OF DRIVER<br/>E. VEHICLE CONDITIONS<br/>F. ROAD SURFACE<br/>G. ROADWAY CONDITION<br/>H. LIGHTING<br/>I. WEATHER<br/>J. TRAFFIC CONTROL<br/>K. KIND OF LOCATION<br/>L. CONDITION OF ROADWAY<br/>M. PEDESTRIAN ACTIONS</p> <p><b>SECONDARY FACTOR</b></p> |
| <p><b>TYPE OF ROADWAY</b></p> <p>A. ONE-WAY ROAD<br/>B. TWO-WAY ROAD WITH NO PHYSICAL SEPARATION<br/>C. TWO-WAY ROAD WITH A PHYSICAL SEPARATION<br/>D. TWO-WAY ROAD WITH A PHYSICAL BARRIER<br/>E. UNUSUAL<br/>F. OTHER</p>                                                                                                                                                                                                                                                                                                                                                                                          | <p><b>WEATHER</b></p> <p>A. CLEAR<br/>B. CLOUDY<br/>C. RAIN<br/>D. FOG/SMOG<br/>E. SLEET/ICE<br/>F. SNOW<br/>G. SEVERE CROSSWIND<br/>H. BLOWING SAND, SOIL, DIRT, SNOW<br/>I. UNUSUAL<br/>J. OTHER</p>                                                                                                                                                                                                                                                                                                                                              | <p><b>VIOLATION</b></p> <p>A. EXCEEDING SPEED LIMIT<br/>B. EXCEEDING MAX SPEED LIMIT<br/>C. FAILURE TO YIELD<br/>D. FOLLOWING TOO CLOSELY<br/>E. DRIVING LEFT OF CENTER<br/>F. CUTTING IN, SWAYING PARKING<br/>G. FAILURE TO SIGNAL<br/>H. SPACE SIDE RIGHT TURN<br/>I. CUT CORNER ON LEFT TURN<br/>J. SWAYED FROM LANE<br/>K. OTHER IMPROPER TURNING<br/>L. IMPROPER TRAFFIC CONTROL<br/>M. IMPROPER PASSING<br/>N. IMPROPER STOPPING<br/>O. FAILURE TO SET OUT FLARE, FLAG<br/>P. FAILURE TO USE SIGNALS<br/>Q. VEHICLE CONDITION<br/>R. DRIVER CONDITION<br/>S. OFFICE USE OPERATION<br/>T. UNLAWFUL LICENSE<br/>U. NO LICENSE<br/>V. OTHER</p>                                                                                                                                                                                                                                  | <p><b>REASON FOR MOVEMENT</b></p> <p>A. TO AVOID OTHER VEHICLE<br/>B. TO AVOID PEDESTRIAN<br/>C. TO AVOID ANIMAL<br/>D. TO AVOID OTHER OBSTACLE<br/>E. PARKING<br/>F. VEHICLE OUT OF CONTROL, NOT PARKED<br/>G. VEHICLE OUT OF CONTROL, PARKING<br/>H. FOR TRAFFIC CONTROL<br/>I. ONE TO GOVERNANCE<br/>J. ONE TO PROTECT OTHER VEHICLE<br/>K. ONE TO PROTECT OTHER VEHICLE<br/>L. ONE TO CORRECT VIOLATION<br/>M. ONE TO VEHICLE CONDITION (SIGNALS)<br/>N. DUE TO IMPROPER CONDITION<br/>O. HIGH WIND<br/>P. IMPROPER MOVEMENT<br/>Q. PARKING UNUSUAL<br/>R. OTHER</p> | <p><b>ACCESS CONTROL</b></p> <p>A. NO CONTROL (UNLIMITED ACCESS TO ROADWAY)<br/>B. PARTIAL CONTROL (LIMITED ACCESS TO ROADWAY)<br/>C. FULL CONTROL (ONLY RAMP ENTRANCE &amp; EXIT)<br/>D. UNUSUAL<br/>E. OTHER</p>                                                                                                                                                              |
| <p><b>VISION OBSCUREMENTS</b></p> <p>A. FOG, SNOW, ETC. ON ROADWAY<br/>B. VEHICLE LIGHTS OBSCURED<br/>C. VISION OBSCURED BY LEADS<br/>D. TRAILS, SMOG, ETC.<br/>E. SHADING<br/>F. BURNING RUBBER<br/>G. SIGN OBSCURED<br/>H. HILL/CREST<br/>I. PARKED VEHICLES<br/>J. BURNING VEHICLES<br/>K. BLIND BY HEADLIGHTS<br/>L. BLIND BY HEADLIGHTS<br/>M. OBSCURED BY ANIMALS IN FIELD OF VIEW<br/>N. UNUSUAL<br/>O. NO CONCLUSIONS<br/>P. OTHER</p>                                                                                                                                                                       | <p><b>CONDITION OF DRIVER</b></p> <p>A. NORMAL<br/>B. DISTRACTED OR OBSTRUCTED<br/>C. PHYSICAL IMPAIRMENT (DISEASE, DRUGS, ALCOHOL)<br/>D. LETHARGY<br/>E. FATIGUED<br/>F. APPARENTLY ALCOHOLIC<br/>G. HAD BEEN DRIVING - IMPAIRED<br/>H. HAD BEEN DRIVING - NOT IMPAIRED<br/>I. DRUG USE - IMPAIRED<br/>J. DRUG USE - NOT IMPAIRED<br/>K. UNUSUAL<br/>L. OTHER</p>                                                                                                                                                                                 | <p><b>HARMFUL EVENTS</b></p> <p>A. CYCLED<br/>B. TIRE FLIP<br/>C. SWAYED<br/>D. ANIMALS<br/>E. OTHER OBSCUREMENTS<br/>F. PEDESTRIAN<br/>G. PEDICYCLE<br/>H. BURNING RUBBER<br/>I. ANIMAL<br/>J. MOTOR VEHICLE<br/>K. MOTOR VEHICLE<br/>L. TRANSPORT OTHER ROADWAY<br/>M. PROPER MOTOR VEHICLE<br/>N. OTHER OBJECT (BICYCLE, ETC.)</p> <p>M. IMPACT ATTEMPTOR<br/>O. OBJECT-FOR ON IMPACT<br/>P. SWAYED-PARTIAL END<br/>Q. SWAYED-PARTIAL<br/>R. OBSCURED FACE<br/>S. OBSCURED END<br/>T. METAL BARRIER<br/>U. UNUSUAL TRAFFIC SIGN POST<br/>V. OVERHEAD SIGN SUPPORT<br/>W. UNUSUAL LIGHT SUPPORT<br/>X. UTILITY POLE<br/>Y. OTHER POLE</p>                                                                                                                                                                                                                                         | <p><b>VEN 1</b></p> <p>FIRST HARMFUL EVENT [ ]<br/>MOST HARMFUL EVENT [ ]</p> <p><b>VEN 2</b></p> <p>FIRST HARMFUL EVENT [ ]<br/>MOST HARMFUL EVENT [ ]</p> <p>Z. CLAIMED<br/>AA. CLERK<br/>BB. GARAGE/REPAIR<br/>CC. MISC. BUS<br/>DD. OTHER</p> <p>EE. FISH<br/>FF. TREE<br/>GG. UNUSUAL<br/>HH. OTHER FOOD OBJECT</p>                                                                                                                                                                                                                                                 |                                                                                                                                                                                                                                                                                                                                                                                 |
| <p><b>RELATION TO ROADWAY</b></p> <p>A. ON ROADWAY<br/>B. SHOULDER<br/>C. MEDIAN<br/>D. BEYOND SHOULDER - LEFT<br/>E. BEYOND SHOULDER - RIGHT<br/>F. OFF ROADWAY<br/>G. GORE<br/>H. UNUSUAL<br/>I. OTHER</p>                                                                                                                                                                                                                                                                                                                                                                                                         | <p><b>ALIGNMENT</b></p> <p>A. STRAIGHT-LEVEL<br/>B. STRAIGHT-LEVEL, SLEAVED<br/>C. CURVE-LEVEL<br/>D. CURVE-LEVEL, ELEVATED<br/>E. ON GRADE-STRAIGHT<br/>F. ON GRADE-CURVE<br/>G. RISE/FALL-STRAIGHT<br/>H. RISE/FALL-CURVE<br/>I. DYE, HUMP-STRAIGHT<br/>J. DYE, HUMP-CURVE<br/>K. UNUSUAL<br/>L. OTHER</p>                                                                                                                                                                                                                                        | <p><b>MOVEMENT PRIOR TO CRASH</b></p> <p>A. STOPPED<br/>B. PROCEEDING STRAIGHT AHEAD<br/>C. TURNING (RIGHT/LEFT)<br/>D. BACKING<br/>E. CHANGING LANE INTO OPPOSITE LANE<br/>F. CHANGING CENTER LINE INTO OPPOSITE LANE<br/>G. PULL OFF ROAD (NOT VEHICLE)<br/>H. CHANGING LANE ON MULTI-LANE ROAD<br/>I. MAKING LEFT TURN<br/>J. MAKING RIGHT TURN<br/>K. STOPPED PREPARED TO MAKE LEFT TURN<br/>L. STOPPED PREPARED TO MAKE RIGHT TURN<br/>M. STOPPED PREPARED TO TURN LEFT<br/>N. STOPPED PREPARED TO TURN RIGHT<br/>O. STOPPED TO MAKE LEFT TURN<br/>P. STOPPED TO MAKE RIGHT TURN<br/>Q. STOPPED TO STOP<br/>R. PROPERLY PARKED<br/>S. PARKING MANEUVER<br/>T. ENTERING TRAFFIC FROM SHOULDER<br/>U. ENTERING TRAFFIC FROM MEDIAN<br/>V. ENTERING TRAFFIC FROM PARKING LANE<br/>W. ENTERING TRAFFIC FROM PRIVATE LANE<br/>X. ENTERING FROM OFF RAMP<br/>Y. OTHER ON UNUSUAL</p> | <p><b>VEHICLE CONDITION</b></p> <p>A. DEFECTIVE BRAKES<br/>B. DEFECTIVE HEADLIGHTS<br/>C. DEFECTIVE REAR LIGHTS<br/>D. DEFECTIVE SIGNAL LIGHTS<br/>E. ALL LIGHTS OUT<br/>F. DEFECTIVE STEERING<br/>G. TIRE FAILURE<br/>H. TIRE ON BROKE TIRE<br/>I. BUSHING FAILURE<br/>J. DEFLECTIVE SUSPENSION<br/>K. RED LIGHTS OBSCURED<br/>L. UNKNOWN DEFECTS<br/>M. OTHER</p>                                                                                                                                                                                                      | <p><b>TRAFFIC CONTROL CONDITIONS</b></p> <p>A. CONTROLS FLASHING<br/>B. CONTROLS NOT FLASHING<br/>C. CONTROLS OBSCURED<br/>D. LANE MARKING OBSCURED OR DISCRETE<br/>E. NO CONTROLS<br/>F. CONDITION UNUSUAL</p>                                                                                                                                                                 |
| <p><b>TRAFFIC CONTROL</b></p> <p>A. STOP SIGN<br/>B. YIELD SIGN<br/>C. RED SIGNAL ON<br/>D. YELLOW SIGNAL ON<br/>E. GREEN SIGNAL ON<br/>F. GREEN TURN APPROX ON<br/>G. RIGHT TURN ON RED<br/>H. LEFT TURN UNUSUAL<br/>I. FLASHING YELLOW<br/>J. FLASHING RED<br/>K. OPPOSITE, WITCHAMAN<br/>L. IN CROSSING, SIGN<br/>M. NO CROSSING SIGNAL<br/>N. NO CROSSING, NO CONTROL<br/>O. WARNING SIGN (SCHOOL, ETC.)<br/>P. SCHOOL FLASHING SPEED SIGN<br/>Q. YELLOW NO PARKING LINE<br/>R. WHITE DASHED LINE<br/>S. YELLOW DASHED LINE<br/>T. BUREL LINE<br/>U. CROSSWALK<br/>V. NO CONTROL<br/>W. UNUSUAL<br/>X. OTHER</p> | <p><b>ALCOHOL/DRUG INVOLVEMENT</b></p> <p>#1 [ ] #2 [ ]</p> <p><b>ALCOHOL/DRUG PRESENT</b></p> <p>A. YES (TESTED)<br/>B. YES (ALCOHOL OR DRUGS PRESENT)<br/>C. YES (DRUGS PRESENT)<br/>D. YES (ALCOHOL AND DRUGS PRESENT)<br/>E. NOT TESTED<br/>F. UNKNOWN</p> <p><b>ALCOHOL</b></p> <p>A. TESTED<br/>B. NO TEST<br/>C. TESTED, RESULTS PENDING<br/>D. TESTED, ETC.<br/>E. UNKNOWN</p> <p><b>DRUGS</b></p> <p>A. TEST NOT GIVEN<br/>B. TEST GIVEN, RESULTS PENDING<br/>C. DRUGS REPORTED (SUSPECT)<br/>D. UNKNOWN</p> <p><b>SUSPECTED DRUGS</b></p> |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                                                                                                                                                                                                                                                                                                                                                                                 |



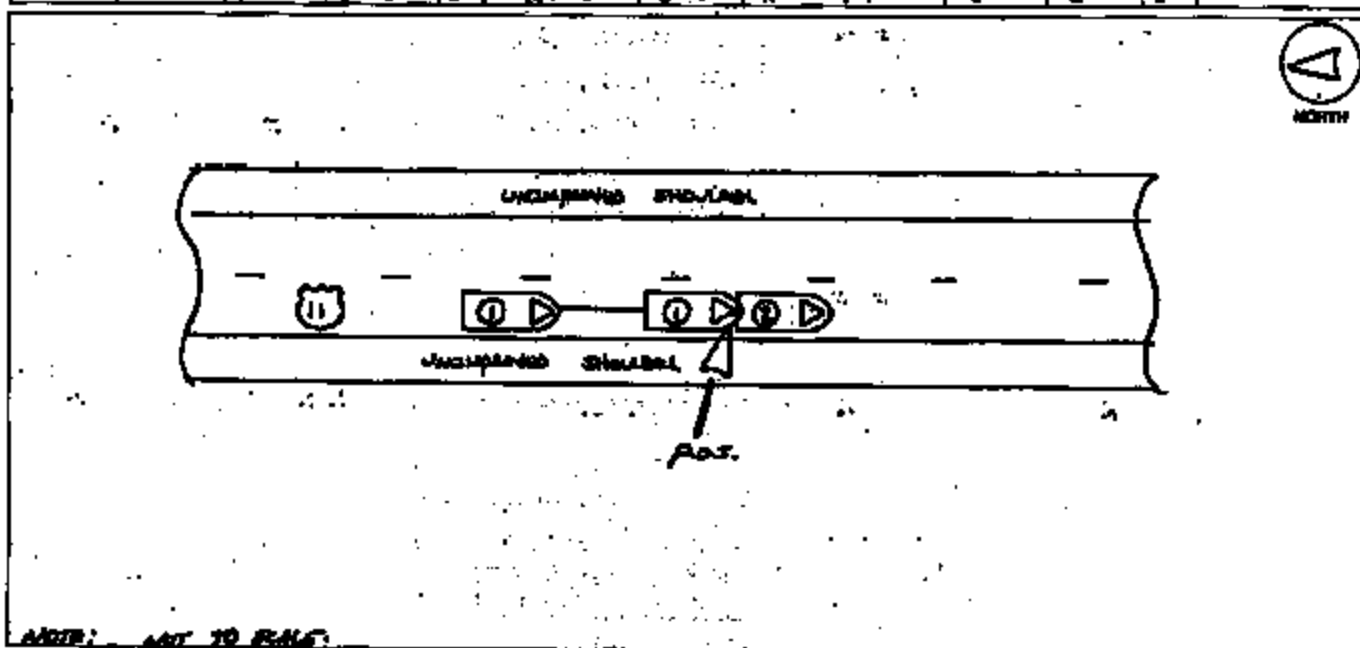
OFFICER'S NARRATIVE DESCRIBE ANY UNUSUAL CIRCUMSTANCES ASSOCIATED WITH CRASH, INCLUDING OFFICER'S OBSERVATIONS AND OPINIONS. INCLUDE WITNESS NAMES, ADDRESSES, PHONE NUMBERS, ETC. IF NECESSARY, INDICATE DAMAGE TO PRIVATE PROPERTY (WITH OWNER'S NAME & ADDRESS) AT THE END OF THE NARRATIVE. REFER TO EACH BY VEHICLE NUMBER

PAGE #

04

VEH-01 AND 02 WERE STOPPED ON U.S. 11. VEH-02 STOPPED DUE TO TRAFFIC CONGESTION. VEH-01 STUCK VEH-02 IN THE ROAD, THE IMPACT CAUSED MINOR/NO SIGNIFICANT DAMAGE TO BOTH VEHICLES. THE DRIVER OF VEH-01 STATED THE BRAKES ON HIS VAN WERE NOT OPERATING CORRECTLY AT THE TIME OF THE CRASH. WHEN THE VEH-01 PUSHED OVER BY THE ROAD THE BRAKES WORKED CORRECTLY.

|                                 |          |         |             |           |           |           |            |            |          |          |       |                     |
|---------------------------------|----------|---------|-------------|-----------|-----------|-----------|------------|------------|----------|----------|-------|---------------------|
| NO COLLISION WITH MOTOR VEHICLE | REAR END | REAR-CH | RIGHT ANGLE | LEFT TURN | LEFT TURN | LEFT TURN | RIGHT TURN | RIGHT TURN | ROUNDOFF | ROUNDOFF | OTHER | MANNER OF COLLISION |
| A                               | B        | C       | D           | E         | F         | G         | H          | I          | J        | K        | L     | 8                   |



| VEH | HEADED   | DIRECTION BEFORE CRASH<br>ON STREET, HIGHWAY OR DRIVE | FINAL LOCATION<br>OF VEHICLES | DISTANCE TRAVELLED<br>AFTER IMPACT | SPEED |        | SIDEMARK (IN FEET) |    |    |    |   |   |
|-----|----------|-------------------------------------------------------|-------------------------------|------------------------------------|-------|--------|--------------------|----|----|----|---|---|
|     |          |                                                       |                               |                                    | EST.  | POSTED | FR                 | FL | RR | RL |   |   |
| 1   | NE<br>SW | U.S. 11                                               | MOVING                        | UNKNOWN                            | 0     | 25     | 4                  | 5  | 0  | 0  | 0 | 0 |
| 2   | NE<br>SW | U.S. 11                                               | MOVING                        | UNKNOWN                            | 0     | 10     | 4                  | 5  | 0  | 0  | 0 | 0 |

| DAMAGE TO VEHICLE 1                                  |                                                             | DAMAGE TO VEHICLE 2                                  |                                                             |
|------------------------------------------------------|-------------------------------------------------------------|------------------------------------------------------|-------------------------------------------------------------|
| <p>AREA DAMAGED</p> <p>1ST A<br/>2ND A<br/>3RD L</p> | <p>EXTENT OF DEFORMITY</p> <p>1ST D<br/>2ND D<br/>3RD D</p> | <p>AREA DAMAGED</p> <p>1ST F<br/>2ND G<br/>3RD H</p> | <p>EXTENT OF DEFORMITY</p> <p>1ST D<br/>2ND D<br/>3RD D</p> |

| STATION NO | VEH 1 | VEH 2 | R.S. OR ORD. NO |
|------------|-------|-------|-----------------|
| 4-78504-42 | 8     | 0     | 32.58           |
| 4-78504-43 | 0     | 8     | 32.52           |
|            |       |       |                 |
|            |       |       |                 |

## Brakes and Traction Control: All Technical Service Bulletins Antilock Brakes - Grinding/Whining/ABS Lamp ON/Codes

Article No.  
98-5A-3

03/18/98

^ BRAKES - ANTI-LOCK - ABS FALSE ACTIVATION AND/OR INTERMITTENT ABS LAMP ON WITH DIAGNOSTIC TROUBLE CODES (DTCs) 1095, 1145, 1155, 1165, 1175, 1233, 1234, 1235, AND/OR 1236 STORED IN MEMORY

^ NOISE - "GRINDING" AND/OR "WHINING" - ANTI-LOCK BRAKES - ABS FALSE ACTIVATION AND/OR INTERMITTENT ABS LAMP ON WITH DIAGNOSTIC TROUBLE CODES (DTCs) 1095, 1145, 1155, 1165, 1175, 1233, 1234, 1235, AND/OR 1236 STORED IN MEMORY

FORD:  
1995-97 CROWN VICTORIA

LINCOLN-MERCURY:  
1995-97 GRAND MARQUIS, TOWN CAR

### ISSUE:

The Anti-lock Brake System (ABS) may activate under false ABS conditions. The customer may notice a "grinding," "whining," "pulsing," or "fluttering" at the brake pedal. The ABS lamp may also illuminate and Diagnostic Trouble Codes (DTCs) 1095, 1145, 1155, 1165, 1175, 1233, 1234, 1235, and/or 1236 may be stored in memory. This may be caused by corrosion at the ABS sensor connectors.

### ACTION:

Replace the wiring connectors at the ABS sensors. The new terminals should reduce the possibility of corrosion and false activation of the ABS system. Refer to the following Service Procedure for details.

### NOTE:

ABS FALSE ACTIVATION CONCERNS CAN OCCUR ON THESE VEHICLES REGARDLESS OF WHETHER THE ABS LAMP IS ILLUMINATED OR NOT; OR IF DTCs ARE SET OR NOT.

### SERVICE PROCEDURE

1. Determine if the ABS system is working to design intent by test driving. Refer TSB 98-5A-6 for an explanation of correct ABS operation.
2. Use New Generation Star (NGS) Tester to diagnose codes if present. Perform the Pinpoint Test for each of the codes found. If the Pinpoint Test leads to "NO PROBLEM FOUND" or "SERVICE/REPAIR HARNESS," then continue to Step 3.
3. For specific model year vehicles, refer to the following.
  - a. For 1995 vehicles, drive the vehicle at 5-6 km/hr (3-4 mph) with Breakout Box installed and use a Digital Volt-Ohm Meter (DVOM) to monitor wheel sensor frequency. Check for low or missing frequency readings.
  - b. For 1996 and 1997 vehicles, use NGS Tester and monitor wheel speed Parameter Identification Display (PID) while driving 5-6 km/h (3-4 mph) to determine which wheel signal is dropping out during the concern.
4. If a wheel is identified, do a visual inspection of the sensor, wiring, and sensor ring. Inspect the air gap between the sensor and sensor ring. The specification should be no more than 1.016 mm (0.040"). Rotate the wheel while checking the air gap. If the air gap increases to more than 1.016 mm (0.040"), replace the sensor and ring. If it does not exceed specifications, proceed with the following Step.

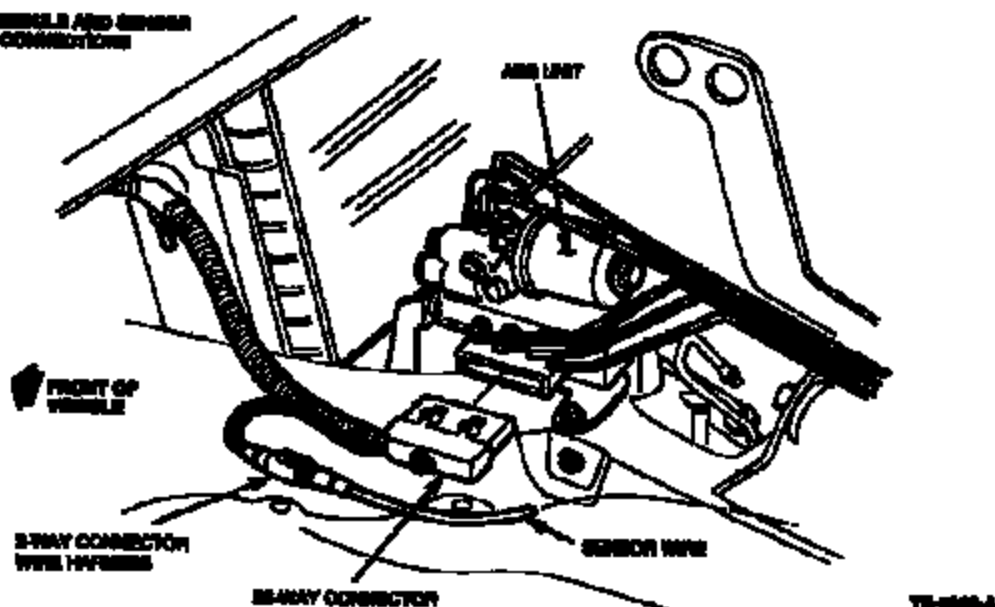
ABS WHEEL AND SENSOR  
WIRE CONNECTIONS

Figure 1

5. Disconnect the wheel speed sensor 2-way connector at all four (4) wheels (Figure 1).
6. Remove the hardshell from the harness side of the connector and cut off terminal ends.

REPLACEMENT TERMINAL

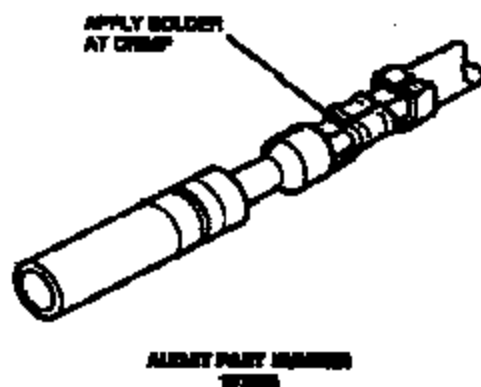


Figure 2

7. Solder new terminal ends (# 101028 found in Drawer B-9 of the Augat Terminal Repair Kit) at each harness circuit. Refer to TSB 96-16-3 for proper splice and solder procedures. Also apply solder on the new terminal at the wire crimp area to reinforce the connection (Figure 2).

**NOTE:**

TO PURCHASE A TERMINAL REPAIR KIT OR ORDER SUPPLIES, CONTACT AUGAT WIRING SYSTEMS AND COMPONENTS, ATTENTION: CUSTOMER SERVICE, 22800 HALL RD., CLINTON TOWNSHIP, MI 48036. TELEPHONE: U.S.A. (800) 466-1988, CANADA (810) 466-1220.

8. Reinstall the hardshell and reconnect the harness to the sensor.
9. Test drive to verify the repair.
10. If the concern is still present, follow the same procedure as outlined in Step 6 to replace all eight (8) sensor circuit terminals at the 28-way connector to the ABS module (Figure 1).

11. Verify the repair.

OTHER APPLICABLE ARTICLES: 96-16-3, 98-5A-6

SUPERSEDES: 97-14-3

WARRANTY STATUS: Eligible Under The Provisions Of Bumper To Bumper Warranty Coverage

| OPERATION | DESCRIPTION                                                                                       | TIME     |
|-----------|---------------------------------------------------------------------------------------------------|----------|
| 985A03A   | Diagnose Anti-Lock Brake System                                                                   | 0.8 Hr.  |
| 985A03BT  | Replace Front Sensor Ring - Both Sides                                                            | 0.9 Hr.  |
| 985A03B   | Replace Front Sensor Ring - One Side                                                              | 0.5 Hr.  |
| 985A03CT  | Replace Front Sensor - Both Sides                                                                 | 0.4 Hr.  |
| 985A03C   | Replace Front Sensor - One Side                                                                   | 0.3 Hr.  |
| 985A03DT  | Replace Rear Sensor Ring - Both Sides                                                             | 1.4 Hrs. |
| 985A03D   | Replace Rear Sensor Ring - One Side                                                               | 1.0 Hr.  |
| 985A03ET  | Replace Rear Sensor - Both Sides                                                                  | 0.5 Hr.  |
| 985A03E   | Replace Rear Sensor - One Side                                                                    | 0.4 Hr.  |
| 985A03F   | Replace Sensor Connector Terminal Ends And/Or Replace Eight (8) Terminal Ends At 28-Way Connector | 0.5 Hr.  |

DEALER CODING

| BASIC PART NO. | CONDITION CODE |
|----------------|----------------|
| 14290          | X2             |

OASIS CODES: 206000, 301000, 702000, 702100

## Brakes and Traction Control: All Technical Service Bulletins ABS System - Grinding/Whining/Lamp ON/Codes Stored

Article No.

98-11-1

06/08/98

^ BRAKES - ANTI-LOCK - ABS FALSE ACTIVATION  
AND/OR INTERMITTENT ABS LAMP ON WITH  
DIAGNOSTIC TROUBLE CODES (DTCs) 1095, 1145,  
1155, 1165, 1175, 1233, 1234, 1235, AND/OR 1236  
STORED IN MEMORY

^ NOISE - "GRINDING" AND/OR "WHINING" -  
ANTI-LOCK BRAKES - ABS FALSE ACTIVATION  
AND/OR INTERMITTENT ABS LAMP ON WITH  
DIAGNOSTIC TROUBLE CODES (DTCs) 1095, 1145,  
1155, 1165, 1175, 1233, 1234, 1235 AND/OR 1236  
STORED IN MEMORY

LINCOLN-MERCURY:

1995-97 GRAND MARQUIS, TOWN CAR

This TSB article is being republished in its entirety to change the phone number listed to purchase a Terminal Repair Kit for Canada.

## ISSUE

The Anti-lock Brake System (ABS) may activate under false ABS conditions. The customer may notice a "grinding," "whining," "pulsing," or "fluttering" at the brake pedal. The ABS lamp may also illuminate and Diagnostic Trouble Codes (DTCs) 1095, 1145, 1155, 1165, 1175, 1233, 1234, 1235, and/or 1236 may be stored in memory. This may be caused by corrosion at the ABS sensor connectors.

## ACTION

Replace the wiring connectors at the ABS sensors. The new terminals should reduce the possibility of corrosion and false activation of the ABS system. Refer to the following Service Procedure for details.

## NOTE

ABS FALSE ACTIVATION CONCERNS CAN OCCUR ON THESE VEHICLES REGARDLESS OF WHETHER THE ABS LAMP IS ILLUMINATED OR NOT, OR IF DTCs ARE SET OR NOT.

OTHER APPLICABLE ARTICLES: 96-16-3, 98-5A-6

SUPERSEDES: 98-5A-3

WARRANTY STATUS: Eligible Under The Provisions Of Bumper To Bumper Warranty Coverage And Emissions Warranty Coverage

| OPERATION | DESCRIPTION                               | TIME    |
|-----------|-------------------------------------------|---------|
| 981101A   | Diagnose Anti-Lock Brake System (ABS)     | 0.8 Hr. |
| 981101BT  | Replace Front Sensor Ring<br>- Both Sides | 0.9 Hr. |
| 981101B   | Replace Front Sensor Ring<br>- One Side   | 0.5 Hr. |
| 981101CT  | Replace Front Sensor -<br>Both Sides      | 0.4 Hr. |

|          |                                                                                                            |          |
|----------|------------------------------------------------------------------------------------------------------------|----------|
| 9811010  | Replace Front Sensor -<br>One Side                                                                         | 0.3 Hr.  |
| 981101DT | Replace Rear Sensor Ring<br>- Both Sides                                                                   | 1.4 Hrs. |
| 981101D  | Replace Rear Sensor Ring<br>- One Side                                                                     | 1.0 Hr.  |
| 981101ET | Replace Rear Sensor -<br>Both Sides                                                                        | 0.5 Hr.  |
| 981101E  | Replace Rear Sensor -<br>One Side                                                                          | 0.4 Hr.  |
| 981101FA | Replace Sensor Connector<br>Terminal Ends                                                                  | 2.4 Hrs. |
| 981101FB | Replace 28 Way<br>Connector Terminal Ends                                                                  | 2.0 Hrs. |
| 981101F  | Replace Sensor Connector<br>Terminal Ends And/Or<br>Replace Eight (8) Terminal<br>Ends At 28-Way Connector | 0.5 Hr.  |

## DEALER CODING

BASIC PART NO.  
14290CONDITION  
CODE  
X2

GASIS CODES: 206000, 301000, 702000, 702100

**THE ATTACHMENTS TO THIS  
DOCUMENT HAVE BEEN REMOVED  
TO PROTECT UNWARRANTED  
INVASION OF PERSONAL PRIVACY  
PURSUANT TO EXEMPTION 6 OF  
THE FREEDOM OF INFORMATION  
ACT (FOIA), 5 U.S.C. 552(b)(6).**