



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 100161

Date Received

Repository ☐

2003 DEC 5 3 PM 2:47
2003 DEC 5 OCT 2003

Reference No.
10044561

OWNER INFORMATION (Type or Print)

Name

Daytime Telephone Number

E-mail Address

Address

City

MARIETTA

State GA

Zip Code

Evening Telephone Number

SAME

Do you authorize NHTSA to provide a copy of this report to the manufacturer of your vehicle? ☒ YES ☒ NO

In the absence of an authorized signature, NHTSA WILL NOT provide your name or address to the vehicle manufacturer.

Signature of Owner

Date 11/02/03

VEHICLE INFORMATION

17 digit Vehicle Identification Number Located at bottom of windshield on driver's side

1LNFM97VXWY676630

Make

LINCOLN

Model

CONTINENTAL

Model Year

1998

Date Purchased

7/24/98

Dealer's Name and Telephone Number FRANK STRASIN (GUY'S BUSINESS)

SERVICE NOW AT AUGMIRE 770 952-7261

Engine:

No. Cylinders

Fuel Type:

SUPER UNLEADED

Original Owner

☒

Dealer's City

MARIETTA

State

GA

Zip Code

Transmission Type

AUTOMATIC

☒ Antilock Brakes

Powertrain

☒ Cruise Control

Vehicle Component Code

162000 SEAT BELTS: REAR

Multiple Failures: 1

FAILED COMPONENT(S)/PART(S) INFORMATION

Incident Date(s)

5/03, 10/03

Failure Mileage

FIRST FAILURE

Failure Speed

UNKNOWN

MIDDLE REAR SEAT BELT WOULD NOT RETRACT

LEFT REAR SEAT BELT WOULD NOT RETRACT

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: DOTM15ABC03B)

☐ Original Equipment

☐ Prior Repair

Failure Location:

Tire Component Code

Tire Failure Type

ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A CHILD SEAT FAILURE

Make:

Date Manufactured:

Model No./Name:

Seat Type:

Installation System:

Child Seat Component Code:

Failed Part:

APPLICABLE INCIDENT INFORMATION

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

Crash

☐ Yes ☒ No

Fire

☐ Yes ☒ No

Number of Persons Injured

0

Number of Deaths

0

Reported to Police

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).

THE REAR MIDDLE SEAT BELT WOULD NOT RETRACT. DEALER DETERMINED THAT THE RETRACTOR WAS DEFECTIVE, AND REPLACED IT UNDER WARRANTY. IT WAS LATER NOTICED THAT THE REAR LEFT SEAT BELT WOULD NOT RETRACT. DEALER DETERMINED THAT THE RETRACTOR WAS DEFECTIVE BUT WOULD ONLY REPLACE THE RETRACTOR AT OWNERS EXPENSE. *AK CENTER REAR BELT PULLED OUT TO PUT CHILD SEAT IN. WOULD NOT RETRACT REAR LEFT BELT IDENTICAL CIRCUMSTANCES TO THE FIRST LINCOLN REP AGREED TO REPLACE LEFT OUT OF WARRANTY WITH \$50 charge. time as deductible. REFUSED TO REPLACE RIGHT REAR UNLESS IT TO FAILS. NO MENTION OFFERED TO ME IF THIS OCCURS.

I REPORTED THE FAILURES TO LINCOLN AS WELL AND THEY TOLD

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)

me if their engineers find a defect in design, belts will be recalled and they would re-imburse my \$20.

I informed them there is no way this is not a defect. In over 5 years my rear seat has not even occupied 212 times.

When the second failure occurred, my car had just over 40K mi. on it.

U.S. Department
of Transportation

National Highway
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Administration

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

Official Business
Penalty for Private Use \$300



BUSINESS REPLY MAIL

FIRST CLASS PERMIT NO 73173 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

NO POSTAGE
NECESSARY
IF MAILED
IN THE
UNITED STATES



**VEHICLE
OWNER'S
QUESTIONNAIRE**

DOT AUTO SAFETY HOTLINE

TO REPORT VEHICLE SAFETY DEFECTS
COMPLETE THIS FORM

OR

DASH2DOT

and dial toll free at

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1-888-327-4238

DOT Auto Safety Hotline
(DASH) & DOT



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www.transportation.gov

**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).**