

DOT 1-888-234-6369 Vehicle Owner's Questionnaire To Report Vehicle Safety Defects 1-888-234-6369 (1-888-327-4236) INTERNET: www.nhtsa.dot.gov/hotline		FOR AGENCY USE ONLY 120	
U.S. Department of Transportation National Highway Traffic Safety Administration		Date Received: 2/1/04	Repository: ☐
		Reference No.: 10057619	
OWNER INFORMATION (Type or Print)			
Name: [REDACTED]			
Address: [REDACTED]			
City: BOONVILLE	State: MO	Zip Code: [REDACTED]	
Do you authorize NHTSA to provide a copy of this report to the manufacturer of your vehicle? In the absence of an authorization, NHTSA WILL NOT provide your name or address to the vehicle manufacturer.			
Signature of Owner: [REDACTED]		Date: 2/1/04	
VEHICLE INFORMATION			
17 digit Vehicle Identification Number Located at bottom of windshield on driver's side: 4M2XV12T3Y [REDACTED]		Make: MERCURY	Model: VILLAGER Sport
		Model Year: 2000	
Date Purchased: 06/08/00	Dealer's Name and Telephone Number: RICK BALL FORD 660-882-3433		Engine: 6 No. Cylinders: 6
Original Owner: [REDACTED]	Dealer's City: BOONVILLE MO	State: MO	Fuel Type: UNLEADED
Transmission Type: 4-sp auto	☒ Antilock Brakes ☒ Cruise Control	Powertrain: 3.3L engine Auto trans	
		Vehicle Component Code: 22000 SEATS/MID/REAR ASSEMBLY	
		Multiple Failure: 1	
FAILED COMPONENT(S)/PART(S) INFORMATION			
Incident Date(s): 05-FEB-2004 02-27-04	Failure Mileage: 81,544	Failure Speed: 45-60	Passenger 2nd Row Seat dislodged from floor
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: DOTM19ABC036)	☐ 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: 1	Number of Deaths: 0
		Reported to Police: YES	
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 CONSUMER WAS INVOLVED IN A HEAD ON COLLISION WHICH CAUSED THE SECOND ROW PASSENGER SEAT TO DISLodge FROM THE FLOOR. THE AIR BAGS DID NOT DEPLOY DURING THIS ACCIDENT. *NM			
Massachusetts State Highway Patrol - Troop F Accident # 504210095 Officer MA Wilson, badge #1214 ☐ Check Police			
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 reported 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, its response, or a statistical summary thereof, may be used in support of the agency's action.			

I'm
 Very
 Used!