



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 100184

Date Received

2004 APR 29
01-APR-2004

Repository

Reference No.
10065442

OWNER INFORMATION (Type or Print)

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

Daytime Telephone Number

E-mail Address

Evening Telephone Number

Do you authorize NHTSA to contact the manufacturer of your vehicle? YES NO
In the absence of an authorized representative, you must provide your name or address to the vehicle manufacturer.
Signature of Owner: [REDACTED] Date: 4/22/04

VEHICLE INFORMATION

17 digit Vehicle Identification Number Located at bottom of windshield on driver's side: See attachment
Make: MERCEDES BENZ Model: ML320 Model Year: 2001

Date Purchased: 1-27-01 Dealer's Name and Telephone Number: [REDACTED]
Original Owner: State: OH Zip Code: 44094 Engine: 6 Cylinders Fuel Type: PREM.

Transmission Type: auto
 Antilock Brakes
 Cruise Control
Powertrain: 4 wheel drive
Vehicle Component Code: 171100 LATCHES/LOCKS/LINKAGES:DOORS:LATCH
Multiple Failure: 1

FAILED COMPONENT(S)/PART(S) INFORMATION

Incident Date(s): 17-FEB-2004 Failure Mileage: 43000 Failure Speed: 10 MPH DRIVER DOOR LOCK

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: DOTM1A9ABC036): [REDACTED] 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: 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).

WHILE PULLING OUT OF A GAS STATION DRIVERS SIDE DOOR CAME OPEN. DEALER EXAMINED THE VEHICLE AND FOUND THAT THE DOOR LOCK WAS DEFECTIVE. A NEW DOOR LOCK WAS REPLACED ON DRIVERS SIDE.*AK

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.

**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).**