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 1367

Date Received	Repository
2004 JUL 15 PM 7:44 04-JUN-2004	Reference No. 10075704

OWNER INFORMATION (Type or Print)

Name		Daytime Telephone Number	E-mail Address
Address	[redacted]	[redacted]	[redacted]
City: COTO DE CAZA	State: CA	Zip Code: [redacted]	Evening Telephone Number

Do you authorize NHTSA to [redacted] t to the manufacturer of your vehicle? ☒ YES ☒ NO
in the address of an autho[redacted] rovide your name or address to the vehicle manufacturer.
Signature of Owner [redacted] Date 6/2/04

VEHICLE INFORMATION

17 digit Vehicle Identification Number Located at bottom of windshield on driver's side	Make	Model	Model Year
WDB 123 130 12[redacted]	MERCEDES BENZ	300	1980

Date Purchased	Dealer's Name and Telephone Number			Engine:	Fuel Type:
1985	Private Party			No. Cylinders	Diesel
Original Owner ☐	Dealer's City	State	Zip Code		

Transmission Type		Powertrain	Vehicle Component Code
AUTOMATIC	☐ Antilock Brakes ☒ Cruise Control	REAR WHEEL DRIVE	033100 SERVICE BRAKES, HYDRAULIC:POWER ASSIST:VACUUM

FAILED COMPONENT(S)/PART(S) INFORMATION

Incident Date(s)	Failure Mileage	Failure Speed	
04-JUN-1989	97000		

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	Fire	Number of Persons Injured	Number of Deaths	Reported to Police
☐ Yes ☒ No	☐ Yes ☒ No			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).

INTERMITTENTLY WHEN THE BRAKE PEDAL IS DEPRESSED BRAKES LOSE POWER ASSIS[redacted] WHEN THIS OCCURS, EXCESSIVE FORCE HAS TO BE APPLIED TO THE BRAKE PEDAL TO STOP THE VEHICLE, WHICH RESULTS IN EXTENDED STOPPING DISTANCE. A FAILURE IN THE BRAKE VACUUM AIR PUMP IS CAUSING THIS PROBLEM TO OCCUR. WHEN THIS PART FAILS THERE' S NO INDICATION OF POWER LOSS UNTIL THE BRAKE PEDAL IS DEPRESSED. THE BRAKE VACUUM AIR PUMP FAILS EVERY 5 YEARS, AND NEEDS TO BE REPLACED. *AK

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

OVER