



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: 08-JUN-2004 -6
Repository:
Reference No.: 10075970

OWNER INFORMATION (Type or Print)

Name: [Redacted]
Address: [Redacted]
City: LUPTON State: MI Zip Code: [Redacted]

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

Do you authorize NHTSA to provide a copy of this report to the manufacturer of your vehicle? YES NO
In the absence of an authorization, NHTSA WILL NOT provide your name or address to the vehicle manufacturer.

Signature of Owner: _____ Date: / /

VEHICLE INFORMATION

17 digit Vehicle Identification Number Located at bottom of windshield on driver's side: 1LNLM81W0P [Redacted]
Make: LINCOLN Model: TOWN CAR Model Year: 1993
Date Purchased: _____ Dealer's Name and Telephone Number: _____ Engine: _____ Fuel Type: _____
Original Owner: Dealer's City: _____ State: _____ Zip Code: _____
Transmission Type: AUTOMATIC Antilock Brakes Cruise Control Powertrain: REAR WHEEL DRIVE
Vehicle Component Code: 183000 VEHICLE SPEED CONTROL/CABLES
Multiple Failure: 1

FAILED COMPONENT(S)/PART(S) INFORMATION

Incident Date(s): 06-JUN-2004 Failure Mileage: 110000 Failure Speed: _____

ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A TIRE FAILURE

Tire Make: _____ Tire Model (Name or Number): _____ Tire Size (Example P215/68R15): _____
DOT No. (Example: DOTM1A9ABC036) 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: _____ Number of Deaths: _____ 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).

WHILE DRIVING VEHICLE SPEED CONTROL DEACTIVATION SWITCH DEVELOPED A RESISTIVE SHORT IN THE ELECTRICAL CIRCUIT. THIS RESULTED IN AN UNDER HOOD FIRE. DAMAGE WAS MINIMUM BECAUSE THE CONSUMER HAD A FIRE DISTINGUISHER ON HAND, AND WAS ABLE TO DISTINGUISH THE FIRE QUICKLY. RECALL 86V12400G WAS ISSUED FOR SPEED CONTROL SWITCH, BUT THIS VEHICLE WAS NOT INCLUDED IN THE RECALL DUE TO VIN. *AK

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

The Privacy Act of 1974-Public Law 93-502 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)

Previous to this event I had the Car into Dean Arden Ford in West Branch for a Fuse kept blowing on Circuit 12. They could not find a problem - I replaced the fuse with a 15 AMP Circuit Breaker because when the fuse would blow it would disable the Brake to Shift Inter lock ~~so any~~ would make car inoperative. This is a ~~condemner~~ so I did not want to strand anyone - on the day of the event, I had just stopped the car and was assisting passengers out when I see smoke coming out from under the hood - I raised the hood and seen the Secondary Speed Control detection switch burning

AW
PM
23 JUN
2004

POSTAGE WILL BE PAID BY ADDRESSEE IF NECESSARY

NO POSTAGE
NECESSARY
IF MAILED
IN THE
UNITED STATES

US Department of Transportation
National Highway Traffic Safety 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 MAILING ORGANIZATION

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

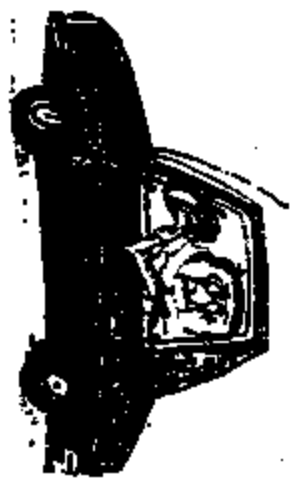
DASH2DOT

and dial toll free at

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1-888-327-4236

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(DASH) 2 DOT



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