



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 100192

Date Received **2005 SEP 29 AM 4:00**
10-JUN-2004
Repository
Reference No. 10076089

OWNER INFORMATION (Type or Print)

Name [REDACTED] Daytime Telephone Number [REDACTED] E-mail Address [REDACTED]
Address [REDACTED]
City **FRUITVALE** State **TX** Zip Code [REDACTED] Evening Telephone Number [REDACTED]

Do you authorize NHTSA to provide a copy of this report to the manufacturer of your vehicle? YES NO
In the absence of an NOT press to the vehicle manufacturer.
Signature of Owner [REDACTED] Date **9/13/05**

VEHICLE INFORMATION

17 digit Vehicle Identification Number Located at bottom of windshield on driver's side **1LNLM82WXPY [REDACTED]** Make **LINCOLN** Model **TOWN CAR** Model Year **1993**
Date Purchased **Sept** Dealer's Name and Telephone Number [REDACTED] Engine: [REDACTED] Fuel Type: [REDACTED]
Original Owner Dealer's City [REDACTED] State [REDACTED] Zip Code [REDACTED] No: Cylinders [REDACTED]
Transmission Type **Automatic** Antilock Brakes Powertrain [REDACTED] Vehicle Component Code **185000 VEHICLE SPEED CONTROL:CRUISE CONTROL**
 Cruise Control Multiple Failure: 1

FAILED COMPONENT(S)/PART(S) INFORMATION

Incident Date(s) **25 JUN-2003** Failure Mileage **125000** Failure Speed **28**

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: DOTM19ABC036) 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).

CRUISE CONTROL WAS DEFECTIVE, CAUSING THE VEHICLE TO CATCH FIRE. IT BURNED UP THE VEHICLE. ALSO BURNED DOWN THE HOUSE. THIS EVENT HAPPENED IN JUNE 2003. SHE WAS NOT AWARE THAT SHE NEEDED TO FILE A COMPLAINT ABOUT THE EVENT AT THAT TIME. SO, SHE WAS DOING IT TODAY. *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 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)

Sorry this is so late. It was misplaced and I also had a problem finding the VIN#.

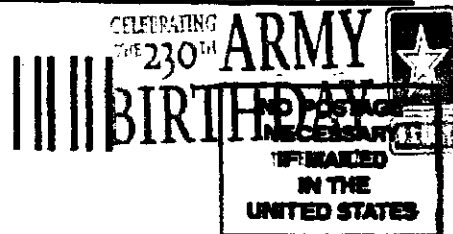
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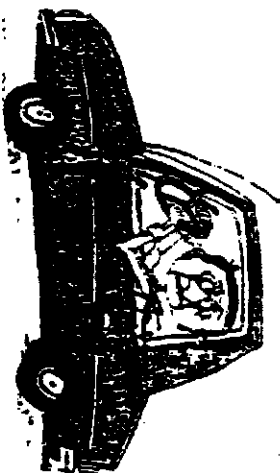
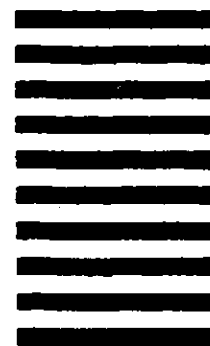
400 Seventh St., S.W. Washington, D.C. 20590

Official Business Penalty for Private Use \$300



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



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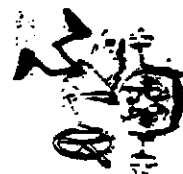
DOT Auto Safety Hotline (DASH) 2 DOT

DASH2DOT and dial toll free at

TO REPORT VEHICLE SAFETY DEFECTS COMPLETE THIS FORM OR

DOT AUTO SAFETY HOTLINE

QUESTIONNAIRE



VEHICLE OWNER'S