



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 10022

Date Received

21-JAN-2005

Repository

Reference No. 15  
10108573

**OWNER INFORMATION (Type or Print)**

Name

Address

City TRUCKEE

State CA

Zip Code

Daytime Telephone Number

E-mail Address

Evening Telephone Number

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.)

YES  NO

Signature of Owner

Date 2/8/05

**VEHICLE INFORMATION**

17 digit Vehicle Identification Number Located at bottom of windshield on driver's side

1M2DU55P7VU

Make

MERCURY

Model

MOUNTAINEER

Model Year

1997

Date Purchased

Dealer's Name and Telephone Number

Engine:

No. Cylinders

Fuel Type:

Gas

Original Owner

Dealer's City

State

Zip Code

Transmission Type

AUTOMATIC

Anti-lock Brakes

Cruise Control

Powertrain:

ALL WHEEL DRIVE

Vehicle Component Code

181000 VEHICLE SPEED CONTROL:ACCELERATOR PEDAL

Multiple Failure: 1

**FAILED COMPONENT(S)/PART(S) INFORMATION**

Incident Date(s)

18-JAN-2005

Failure Mileage

101000

Failure Speed

50

**ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A TIRE FAILURE**

Tire Make

Tire Model (Name or Number)

Tire Size (Example P215/85R15)

DOT No. (Example: DOTM1A9ABC03B)

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

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 DRIVING 50 MPH THE CONSUMER FELT SOMETHING UNDER HIS FOOT SNAP. THE CONSUMER LOST SPEED, PULLED OVER TO THE SIDE OF THE ROAD, TO DISCOVER THE BOLT HOLDING THE ACCELERATOR PEDAL HAD FALLEN OFF. THE CONSUMER WAS ABLE TO DRIVE THE VEHICLE IN ORDER TO HAVE THE REPAIR DONE. \*NM

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.