



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-DDT
(1-888-327-4236)

INTERNET: www.nhtsa.dot.gov/hotline

FOR AGENCY USE ONLY 100148

Date Received

Repository

2005 SEP 29 11 45 AM '05
22 JUN 2005

Reference No.
10126282

OWNER INFORMATION (Type or Print)

Name

Address

City BAYSIDE

State NY

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

VEHICLE INFORMATION

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

4JGAB75E

Make

MERCEDES BENZ

Model

ML500

Model Year

2004

Date Purchased
31-MAR-04

Dealer's Name and Telephone Number
HELMS BROTHERS MERCEDES 718-651-8298

Engine:
No. Cylinders 6

Fuel Type:
Gas

Original Owner

Dealer's City
BAYSIDE

State
NY

Zip Code

Transmission Type
AUTOMATIC

Antilock Brakes
 Cruise Control

Powertrain
ALL WHEEL DRIVE

Vehicle Component Code
191000 TIRES:TREAD/BELT

Multiple Failure: 1

FAILED COMPONENT(S)/PART(S) INFORMATION

Incident Date(s)
28-APR-2005

Failure Mileage
8900

Failure Speed

ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A TIRE FAILURE

Tire Make
DUNLOP

Tire Model (Name or Number)
DUNLOP

Tire Size (Example P215/65R15)
275/55/VR17

DOT No. (Example: DOTMAL8ABC036)

Original Equipment
 Prior Repair

Failure Location:

The Component Code
191000 TIRES:TREAD/BELT

Tire Failure Type OUT OF ROUND

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, if available, including 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).

DT:CONSUMER HAD TWO DUNLOP SP 5000 TIRES THAT WERE CUPPED. AS A RESULT OF THE CUPPING CONSUMER GOT 4 NEW TIRES. CONSUMER HAD ALIGNMENT AND BALANCING DONE. CONSUMER INDICATED THAT VEHICLE OPERATED POORLY AT LOW SPEED. IT FELT LIKE VEHICLE WAS ROCKING BACK AND FORTH. AT 18 MPH VEHICLE VIBRATED. CONSUMER STATED THAT VEHICLE MADE HIM ILL TO DRIVE DUE TO THE VIBRATION. GOODYEAR GAVE CONSUMER MONEY BACK AND CONSUMER RETURNED GOODYEAR THE TIRES. CONSUMER WENT TO MERCEDES DEALER, AND THE DEALER PERFORMED ALIGNMENT, BALANCING, AND DIAGNOSTIC. DEALER PUT SAME TIRES ON VEHICLE, AND CONSUMER HAD THE SAME PROBLEM WITH NEW TIRES AS WITH THE PREVIOUS SET. *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.