



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
(1-888-327-4238)
INTERNET: www.nhtsa.dot.gov/hotline

FOR AGENCY USE ONLY 100148

Date Received

Repository

2005 OCT 20 AM 8:19 SEP 2005

Reference No.
10198612

OWNER INFORMATION (Type or Print)

Name _____
Address _____
City LVNN State MA 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? 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 1LNLM8 _____		Make LINCOLN	Model TOWN CAR	Model Year 1984
Date Purchased 01-SEP-04	Dealer's Name and Telephone Number PRIVATE PARTY		Engine: No. Cylinders 8	Fuel Type: Gas
Original Owner <input type="checkbox"/>	Dealer's City	State	Zip Code	
Transmission Type AUTOMATIC	<input checked="" type="checkbox"/> Antilock Brakes <input checked="" type="checkbox"/> Cruise Control	Powertrain REAR WHEEL DRIVE	Vehicle Component Code 021540 SUSPENSION:FRONT:CONTROL ARM:LOWER BALL JOINT	
Multiple Failure: 1				

FAILED COMPONENT(S)/PART(S) INFORMATION

Incident Date(s) 18-SEP-2005	Failure Mileage 148060	Failure Speed APPROX 15 MPH	* OCCURRED IN CITY TRAFFIC (HEAVY SLOW) I PULLED OFF ROAD TO ADJACENT PARKING LOT
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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: DOTM4L8ABC036)	<input type="checkbox"/> Original Equipment <input type="checkbox"/> 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

Crash <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Fire <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Number of Persons Injured	Number of Deaths	Reported to Police
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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: THE CONTACT STATED THE FRONT LEFT BALL JOINT FELL OUT OF 1984 LINCOLN TOWN CAR. THIS HAPPENED ON 8-18-05. THIS WAS THE FIRST TIME THIS HAS HAPPENED. *AX
NOTE - IF THIS HAD HAPPENED WHEN DRIVING ON THE HIGHWAY (RT 128 AND 95) IN HEAVY TRAFFIC AND HIGH SPEED (60 MPH), IT COULD HAVE CAUSED A CATASTROPHIC ACCIDENT WITH MANY INJURIES AND POSSIBLE FATALITIES. THERE ARE PROVISIONS TO LUBRICATE THE BALL JOINTS. * * *

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.

* * * W H E R E S W H E E L C O L L A P S E D .

* * * T H I S I S A V E R Y D A N G E R O U S E X I S T I N G S I T U A T I O N

SPAT

Narrative Description of Incident(s), Failure(s), Crash(es), and Injury(ies)

WHILE DRIVING IN CITY TRAFFIC (HEAVY) AT A MODERATE SPEED OF APPROXIMATELY 15 MPH I NOTICED THE STEERING BECOMING VERY STIFF AND DIFFICULT TO CONTROL. I FORTUNATELY WAS ABLE TO PULL OFF THE ROAD INTO AN ADJACENT PARKING LOT, WHERE THE WHEEL COLLAPSED - BALL JOINT CAME OUT OF ITS SOCKET. IF THIS HAD HAPPENED ON A HIGH-SPEED HIGHWAY SUCH AS RD 128 OR ~~MASS 128~~ ROUTES MASS 128 OR US 95 OR 93 A CATASTROPHIC ACCIDENT COULD HAVE OCCURRED WITH MANY INJURIES AND/OR FATALITIES. NO ONE WOULD HAVE KNOWN THAT THE BALL JOINT HAD FAILED - ALLOWING THE WHEEL TO COLLAPSE. THEY MIGHT ASSUME THE ACCIDENT WAS THE CAUSE.

ATTACH ADDITIONAL SHEETS IF NECESSARY

U.S. Department of Transportation

National Highway Traffic Safety Administration

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

Official Business Penalty for Private Use \$300



NO POSTAGE NECESSARY IF MAILED IN THE UNITED STATES

BUSINESS REPLY MAIL
FIRST CLASS PERMIT NO 73173 WASHINGTON, D.C.

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



VEHICLE OWNER'S QUESTIONNAIRE

DOT AUTO SAFETY HOTLINE

TO REPORT VEHICLE SAFETY DEFECTS COMPLETE THIS FORM OR

DASH2DOT

and dial toll free at

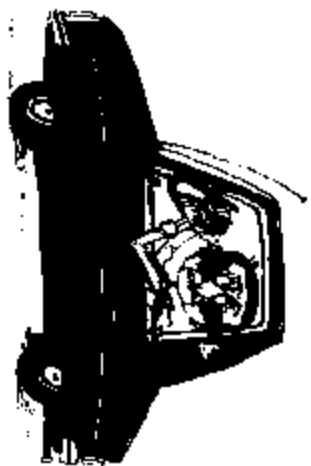
1-888-DASH-2-DOT

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THE ATTACHMENTS TO THIS
DOCUMENT HAVE BEEN REMOVED
TO PROTECT UNWARRANTED
INVASION OF PERSONAL PRIVACY
PURSUANT TO EXEMPTION 6 OF
THE FREEDOM OF INFORMATION
ACT (FOIA), 5 U.S.C. 552(b)(6).