



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 100148

Date Received

Repository ☐

03-MAR-2006

Reference No.

10151688

OWNER INFORMATION (Type or Print)

Name

Address

City WESKAN

State KS

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 authorized signature, provide your name or address to the vehicle manufacturer.
Signature of Owner _____ Date 3/18/06

VEHICLE INFORMATION

17 digit Vehicle Identification Number Located at bottom of windshield on driver's side
1LNHM81W73Y

Make
LINCOLN

Model
TOWN CAR

Model Year
2003

Date Purchased

Dealer's Name and Telephone Number
LANDMARK MOTORS

Engine:

No: Cylinders 8

Fuel Type:

Gas

Original Owner

☒

Dealer's City

DENVER

State

CO

Zip Code

Transmission Type

☒

Antilock Brakes

Powertrain

REAR WHEEL DRIVE

Vehicle Component Code

142000 AIR BAGS:SIDE/WINDOW

Multiple Failure: 1

AUTOMATIC

☒ Cruise Control

FAILED COMPONENT(S)/PART(S) INFORMATION

Incident Date(s)
03-MAR-2006

Failure Mileage
60000

Failure Speed
62

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: DOTM19ABC036)

☐ 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).

DT*: THE CONTACT STATED WHILE DRIVING 45 MPH, THE SIDE CURTAIN AIRBAG ON THE DRIVER SIDE DEPLOYED WITHOUT WARNING. THE DEALERSHIP AND MANUFACTURER WERE ALERTED, BUT NO REPAIRS WERE MADE.

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.

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

I was driving down the road at approximately 62 mph. My daughter and grand daughter were with me. We thought we had been shot at. There was a loud ear ringing noise I stopped the car and discovered the side air bag had deployed. We had not hit a bump or anything that gave us a warning. I feel had I been in traffic at the time there could have easily been a crash with another vehicle.

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

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-210
400 7th Street, SW
Washington, DC 20590

NO POSTAGE
NECESSARY
IF MAILED
IN THE
UNITED STATES



**Think your vehicle
has a safety defect?**



If so:

**Use the enclosed
form to file a report.**

or visit:

www.safercar.gov

or call:

**Vehicle Safety Hotline
888-327-4236**



Vehicle Owner's Questionnaire (VOQ)
U.S. Department of Transportation
National Highway Traffic Safety Administration

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).