



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

2006 NOV - 3 2:15  
23-AUG-2006

Repository

Reference No.  
10166374

**OWNER INFORMATION (Type or Print)**

Name [REDACTED]  
Address [REDACTED]  
City MURRYSVILLE State PA Zip Code [REDACTED]

Daytime Telephone Number [REDACTED]

E-mail Address [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 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  
1LNLM81W7 [REDACTED] Make LINCOLN Model TOWN CAR Model Year 1994

Date Purchased 09-MAY-02 Dealer's Name and Telephone Number \_\_\_\_\_ Engine: No: Cylinders 8 Fuel Type: Gas  
Original Owner  Dealer's City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Transmission Type AUTOMATIC  Antilock Brakes  Cruise Control Powertrain REAR WHEEL DRIVE Vehicle Component Code 033210 SERVICE BRAKES, HYDRAULIC: POWER ASSIST: HYDRAULIC: Multiple Failure: 1

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

Incident Date(s) 15-JAN-2006 Failure Mileage 45000 Failure Speed 35

**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 35 MPH ON NORMAL CITY ROAD CONDITIONS THERE WAS COMPLETE BRAKE FAILURE WHICH ALMOST CAUSED THE VEHICLE HIT ANOTHER VEHICLE DRIVING IN FRONT. THE VEHICLE WAS TAKEN TO THE DEALERSHIP WHO OBSERVED RUSTING IN THE HYDRAULIC LINE. THE LINE WAS LOCATED UNDER THE DRIVER SIDE. FLUID LEAKED OUT OF THE LINE LEAVING THE REAR WHEELS WITHOUT BRAKING ACTION. THE CONTACT EXPRESSED CONCERN BECAUSE THE FLUID LINES WERE NOT STANLEY STEEL MANUFACTURED. THERE WAS A RECALL # 95V133000 FOR THE VEHICLE HOWEVER IT DID NOT MENTION THE CORROSION AS A FACTOR FOR POSSIBLE FLUID LEAKAGE.\*AK

Brake Lines, A Life Saving Device, Should Be Made from Stainless Steel, Like The mouldings - That Last Forever

Stainless Steel

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.