



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

2007 JUN - 8 AM 10:43  
16-MAY-2007

Repository

Reference No.  
10190923

OWNER INFORMATION (Type or Print)

Name [REDACTED]

Address [REDACTED]

City ATLANTA

State GA

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 [REDACTED] Date 5/20/07

VEHICLE INFORMATION

17 digit Vehicle Identification Number Located at bottom of windshield on driver's side  
1LNHM83W3 [REDACTED]

Make  
LINCOLN

Model  
TOWN CAR

Model Year  
2001

Date Purchased  
01-JUL-02

Dealer's Name and Telephone Number  
Cloverleaf Lincoln

Engine:  
No: Cylinders 8

Fuel Type:  
Gas

Original Owner

Dealer's City  
Decatur

State  
GA

Zip Code

Transmission Type  
AUTOMATIC

Antilock Brakes  
 Cruise Control

Powertrain  
REAR WHEEL DRIVE

Vehicle Component Code

136200 VISIBILITY: WINDSHIELD WIPER/WASHER: MOTOR

Multiple Failure: 15

FAILED COMPONENT(S)/PART(S) INFORMATION

Incident Date(s)  
01-APR-2007

Failure Mileage  
48000

Failure Speed

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

0

Number of Deaths

0

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).

TL\*THE CONTACT OWNS A 2001 LINCOLN TOWN CAR. THE CONTACT STATED THAT THERE IS A RECALL # 01V258000 (VISIBILITY: WINDSHIELD WIPER/WASHER: MOTOR). THE MANUFACTURER STATED THAT HER VEHICLE WAS EXCLUDED FROM THE RECALL. THE CONTACT STATED THAT HER VEHICLE EXPERIENCED THE SAME FAILURES LISTED IN THE RECALL AND FEELS THAT HER VEHICLE SHOULD BE INCLUDED. THE CURRENT MILEAGE IS 51,000 AND FAILURE MILEAGE WAS 48,000.

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.