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 ☐
30-AUG-2007	Reference No. 10201207
2007 DEC 12 AM 9:12	

OWNER INFORMATION (Type or Print)

Name	[redacted]		
Address	1 [redacted]	Daytime Telephone Number [redacted]	E-mail Address
City LAKE ZURICH	State IL	Zip Code [redacted]	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 aut[redacted]your name or address to the vehicle manufacturer.
Signature of Owner [redacted] Date 11/21/07

VEHICLE INFORMATION

17 digit Vehicle Identification Number Located at bottom of windshield on driver's side	Make	Model	Model Year
WDBLJ70G02T[redacted]	MERCEDES BENZ	CL CLASS	2002

Date Purchased	Dealer's Name and Telephone Number		Engine:	Fuel Type:
30-APR-02	KANUZ CONTINENTAL AUTOS KNAUZ		No: Cylinders 8	Gas
Original Owner ☒	Dealer's City LAKE BLUFF	State IL / Zip Code		

Transmission Type		Powertrain	Vehicle Component Code
AUTOMATIC	☒ Antilock Brakes ☒ Cruise Control	REAR WHEEL DRIVE	117000 DIGITAL INSTRUMENT PANEL Multiple Failure: 1

FAILED COMPONENT(S)/PART(S) INFORMATION

Incident Date(s)	Failure Mileage	Failure Speed
01-JUN-2004	18000	0

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: DOTMAL9ABC036)	☐ 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	Fire	Number of Persons Injured	Number of Deaths	Reported to Police
☐ Yes ☒ No	☐ Yes ☒ No	0	0	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 2002 MERCEDES CLK430. THE CONTACT STATED THAT THE LED THAT DISPLAYED THE SPEED, GEARS, TEMPERATURE, AND CLOCK IS NOT OPERATING NORMALLY AND THE HE IS UNABLE TO READ THE GAUGES. THE DEALER REPLACED THE INSTRUMENT CLUSTER. THE FAILURE MILEAGE WAS 18,000 AND THE FAILURE MILEAGE WAS 31,000.

DISPLAY IS LCD NOT LED

Include, if available: Police/Fire Department Report, Photos, and Repair Invoice. ATTACH ADDITIONAL SHEETS IF NECESSARY