



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 29-JUL-2008
Repository
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OWNER INFORMATION (Type or Print)

Name [Redacted]
Address [Redacted]
City RUSH SPRINGS State OK 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?
In the absence of an answer, NHTSA will not provide your name or address to the vehicle manufacturer.
Signature of Owner [Redacted] Date 7/29/08 YES NO

VEHICLE INFORMATION

17 digit Vehicle Identification Number Located at bottom of windshield on driver's side: 1LNHM81W81 [Redacted]
Make LINCOLN Model TOWN CAR Model Year 2001
Date Purchased [Redacted] Dealer's Name and Telephone Number [Redacted] Engine: [Redacted] Fuel Type: [Redacted]
Original Owner Dealer's City [Redacted] State [Redacted] Zip Code [Redacted] No: Cylinders [Redacted]
Transmission Type Antilock Brakes Cruise Control Powertrain [Redacted] Vehicle Component Code 141000 AIR BAGS:FRONTAL
Multiple Failure: [Redacted]

FAILED COMPONENT(S)/PART(S) INFORMATION

Incident Date(s) 20-JUL-2008 Failure Mileage 113480 Failure Speed 45

ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A TIRE FAILURE

Tire Make [Redacted] Tire Model (Name or Number) [Redacted] Tire Size (Example P215/65R15) [Redacted]
DOT No. (Example: DOTM19ABC036) Original Equipment Prior Repair Failure Location: [Redacted]
Tire Component Code [Redacted] Tire Failure Type [Redacted]

ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A CHILD SEAT FAILURE

Make: [Redacted] Date Manufactured: [Redacted] Model No./Name: [Redacted]
Seat Type: [Redacted] Installation System: [Redacted]
Child Seat Component Code: [Redacted] Failed Part: [Redacted]

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. WHILE DRIVING 45 MPH, THE DRIVER'S SIDE FRONTAL AIR BAG DEPLOYED WITHOUT WARNING OR IMPACT. THE FAILURE MILEAGE WAS 113,480 AND CURRENT MILEAGE WAS 113,500.
It was fortunate that when the bag deployed we were not in traffic. The noise, which sounded like a gun, was quite frightening and could have caused us to swerve into another vehicle.

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 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.