



NOV 10 2009

DOT Auto Safety Hotline

FOR AGENCY USE ONLY 100148

U.S. Department of Transportation

Vehicle Owner's Questionnaire To Report Vehicle Safety Defects

Date Received

Repository

National Highway Traffic Safety Administration

1-888-DASH-2-DOT (1-888-327-4236) INTERNET:www.nhtsa.dot.gov/hotline

13-OCT-2009

Reference No. 10287193

OWNER INFORMATION (Type or Print)

Name

Daytime Telephone Number

E-mail Address

Address

Evening Telephone Number

City

JULIUSTOWN

State

NJ

Zip Code

The information you provide will be used to identify potential safety-related defects. We may share your information with the applicable vehicle manufacturer during an investigation or recall in accordance with the routine uses described in the agency's Privacy Act notice. See 49 FR 53971 (Sep. 3, 2004).

VEHICLE INFORMATION

17 digit Vehicle Identification Number Located at bottom of windshield on driver's side 4M2DU86W04

Make MERCURY

Model MOUNTAINEER

Model Year 2004

Date Purchased 08/2007

Dealer's Name and Telephone Number QUALITY LINCOLN MERCURY HYUNDAI 856-327-3000

Engine:

Fuel Type:

Original Owner

Dealer's City MILLVILLE

State NJ

Zip Code 08332

No: Cylinders 8

Unlead

Transmission Type

Antilock Brakes

Powertrain

Multiple Failure: Front & Back Side Air BAGS

Incident Date(s)

06-MAR-2009 12-08-2008

Auto

Cruise Control

FAILED COMPONENT(S)/PART(S) INFORMATION

Vehicle Component Code: 140000 AIR BAGS

Failure Mileage 67000

Failure Speed 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: 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).

TL\* THE CONTACT OWNS A 2004 MERCURY MOUNTAINEER. WHILE IDLING AT A STOP LIGHT, THE AIR BAGS DEPLOYED WITHOUT ANY PRIOR WARNINGS. AN INSPECTOR FROM THE INSURANCE AGENCY CONCLUDED THAT THE FAILURE WAS CAUSED BY A MANUFACTURES DEFECT. THE MANUFACTURER WAS NOTIFIED, AND A REPRESENTATIVE REQUESTED THE CONTROL RESTRAINT MODULE FROM THE DEALER TO INVESTIGATE THE FAILURE. NO REPAIRS WERE MADE. SHE WAS AWAITING A RESPONSE FROM THE MANUFACTURER. THE FAILURE MILEAGE WAS 60,000.

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.