



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

AUG 29 2011

22-JUL-2011

Repository

Reference No.
10414632

OWNER INFORMATION (Type or Print)

Name [REDACTED]
Address [REDACTED]
City CHESAPEAKE BEACH State MD Zip Code [REDACTED]

Daytime Telephone Number [REDACTED] E-mail Address [REDACTED]
Evening Telephone Number [REDACTED]

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
WDBPJ75344A [REDACTED] Make MERCEDES BENZ Model CL CLASS Model Year 2004
Date Purchased 8-13-10 Dealer's Name and Telephone Number Don Allen Servicerter 703-370-0300 Engine: V8 No: Cylinders 8 Fuel Type: Regular
Original Owner Dealer's City Alexandria State VA Zip Code 22304
Transmission Type 5 Speed Automatic Antilock Brakes Cruise Control Powertrain Standard Mercedes Multiple Failure: one Incident Date(s) 16-JUL-2011

FAILED COMPONENT(S)/PART(S) INFORMATION

Vehicle Component Codes: 190000 TIRES, 190000 TIRES Failure Mileage 88000 Failure Speed 65

ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A TIRE FAILURE

Tire Make MICHELIN Tire Model (Name or Number) PRIMACY MXV4 TL Tire Size (Example P215/65R15) 225/55 R17 97H
DOT No. (Example: DOTMAL9ABC036) DOT#898KEF1X4707 Original Equipment Prior Repair Failure Location: PASSENGER SIDE FRONT
Tire Component Code 190000 TIRES Tire Failure Type: BLOWOUT

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 Y

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 MERCEDES BENZ CL WITH MICHELIN PRIMACY MXV4 TL TIRES, LINE SIZE 225/55/R17, DOT NUMBER: 898KEF1X4707. THE CONTACT WAS DRIVING 65 MPH WHEN THE FRONT PASSENGER SIDE TIRE BLEW, CAUSING THE VEHICLE TO CRASH INTO AN EMBANKMENT. THERE WERE NO INJURIES BUT THE VEHICLE WAS DESTROYED. THE POLICE WERE CALLED TO THE SCENE AND A REPORT WAS FILED. THE ESTIMATED MILEAGE ON THE TIRES WAS 16,000 AND THE REMAINING TREAD DEPTH WAS 5/16 INCHES. THE MANUFACTURER WAS CONTACTED AND ADVISED THE CONTACT THAT HE SHOULD RETURN THE TIRE TO THEM FOR FURTHER INSPECTION. THE VEHICLE MILEAGE WAS 88,000.

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 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.

[REDACTED]
Chesapeake Bch, MD [REDACTED]

Phone-[REDACTED]

August 22, 2011

U.S. Dept of Transportation
National Highway Traffic Safety Administration
Office of Defects Investigation
Correspondence Research Division
Randy Reid, Chief

Dear Mr.Reid,

On the morning of July 16, 2011, a clear and dry day, my grandson was driving north on I-85 in North Carolina. About at mile post 218, there was a catastrophic blow-out in the right front tire. The car went down a culvert on the left side of the road clipping off a sign post and coming to a rest on the right side of the road. Three air bags went out on the right side of the car. On the tire, there is a 14 inch banana shaped blow-out on the outside rim of the tire and about 1 ½ inch material from one end to the other is missing.

The tire was sent to Michelin for examination, but Michelin denies all responsibility. Michelin has returned the tire to me. I also have pictures from the accident scene.

The car was towed back to Maryland but it was totaled.

I would like for you to further pursue an investigation into this matter.

Sincerely,

[REDACTED]

www.siskautobody.com

Sisk Auto Body Inc.

167 Thomas Ave., Owings, MD 20736
 (301) 855-5525
 Fax: (410) 257-1925

Damage Assessed By: BARBARA SISK

Deductible: 0.00
 Claim Number: [REDACTED]
 Owner: [REDACTED]

Mitchell Service: 917287

Description: 2004 Mercedes-Benz CL500
 Body Style: 2D Cpe Drive Train: 5.0L Inj 8 Cyl 7A RWD
 VIN: WDBPJ75J44A [REDACTED]
 OEM/ALT: O Search Code: None
 Options: REAR, TRUNK, OR CARGO AREA MOUNTED CD CHANGER, POWER DRIVER SEAT, POWER LOCK
 POWER WINDOW, CRUISE CONTROL, TILT STEERING COLUMN, POWER PASSENGER SEAT
 TELESCOPIC STEERING COLUMN, PREMIUM SOUND SYSTEM, ANTI-LOCK BRAKE SYS.
 TRACTION CONTROL, ALUM/ALLOY WHEELS, NAVIGATION SYSTEM
 HIGH INTENSITY DISCHARGE HEADLIGHTS, FRONT AIR DAM, TINTED GLASS
 GENUINE WOOD TRIM, AUTO AIR CONDITION, TRIP COMPUTER, SUBWOOFER
 TELEMATIC SYSTEMS, UNIVERSAL GARAGE DOOR OPENER, VARIABLE ASSISTED STEERING
 ANTI-THEFT SYSTEM, AUTOMATIC HEADLIGHTS
 INTERIOR AUTOMATIC DAY/NIGHT OR ELECTROCHROMATIC MIRROR
 VEHICLE THEFT TRACKING/NOTIFICATION, DAYTIME RUNNING LIGHTS
 ADAPTIVE VARIABLE SUSPENSION, ELECTRONIC STABILITY CONTROL
 EXTERIOR MEMORY MIRRORS, FRONT HEATED BUCKET SEATS
 FRONT SEATS WITH POWER LUMBAR SUPPORT, KEYLESS ENTRY SYSTEM
 LEATHER AND WOOD STEERING WHEEL, POWER DISC BRAKES, POWER DOOR CLOSERS
 POWER HEATED ELECTROCHROMATIC EXTERIOR MIRRORS, POWER LIFTGATE/TRUNK
 POWER REAR WINDOW SUNSHADE, RAIN SENSING WIPERS, REAR WINDOW DIVERSITY ANTENNA
 STEERING WHEEL AUDIO CONTROLS, SUNROOF/MOONROOF (POWER)

line	Entry	Labor	Operation	Line Item	Part Type/ Part Number	Dollar Amount	Labor Units
1	AUTO	BDY	OVERHAUL	Frt Bumper Cover Assy			2.6
2	701792	BDY	REMOVE/REPLACE	Frt Bumper Cover	215 880 03 40	1,040.00	INC
3	AUTO	REF	REFINISH	Frt Bumper Cover			C 2.5
4	702473	BDY	REMOVE/REPLACE	Frt Ctr Bumper Grille	215 885 09 53	510.00	INC
5	700063	BDY	REMOVE/INSTALL	L Frt Combination Lamp			0.4 #
6	700107	REF	BLEND	Hood Outside			C 1.3
7	700113	BDY	REMOVE/INSTALL	Emblem			0.2
8	700114	BDY	REMOVE/INSTALL	Vent Grille			0.3
9	702376	BDY	REMOVE/INSTALL	R Otr Hood Washer Nozzle			0.2 #
10	702377	BDY	REMOVE/INSTALL	L Otr Hood Washer Nozzle			0.2 #
11	702378	BDY	REMOVE/INSTALL	Inr Hood Washer Nozzle			0.2 #

ESTIMATE RECALL NUMBER: 07/25/2011 11:58:43 19343

Mitchell Data Version: OEM: JUN_11_V UltraMate is a Trademark of Mitchell International

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UltraMate Version: 7.0.433

All Rights Reserved

Line	Part	Qty	Description	Unit	Estimate	Price	Notes
12	700146	BDY	REMOVE/REPLACE	Cooling Radiator	220 500 09 03	410.00	2.3 #
13	700274	REF	REFINISH	L Fender Outside			C 2.2
14	700282	BDY	REMOVE/INSTALL	L Fender Moulding			0.3
15	700283	BDY	REMOVE/REPLACE	R Fender Panel	215 880 02 18	575.00	2.3 #
16	AUTO	BDY	CHECK/ADJUST	Headlamps			0.4
17	AUTO	REF	REFINISH	R Fender Outside			C 2.0
18	AUTO	REF	REFINISH	R Add To Edge Fender			C 0.5
19	700285	BDY	REMOVE/REPLACE	R Fender Side Moulding	215 690 04 62 9960	90.00	INC
20	700303	BDY	REMOVE/REPLACE	R Frt Fender Shield	220 690 26 30	22.50	
21	700404	MCH	REMOVE/REPLACE	R Air Bag Side Curtain Module	215 880 02 05	438.00	0.7 #
22	702017	BDY	REMOVE/REPLACE	Wheel	220 401 24 02	515.00	0.3
23	900500	BDY *	REMOVE/REPLACE	RT FRT TIRE	New	225.00 *	0.0*
24	900500	MCH *	ADD'L LABOR OP	TIRE FEE	Sublet	2.00 *	0.0*
25	900500	MCH *	REMOVE/REPLACE	VALVE STEM	New	4.00 *	0.0*
26	900500	MCH *	ADD'L LABOR OP	MOUNT & BALANCE	Existing		0.3*
27	900500	MCH *	ADD'L LABOR OP	FOUR WHEEL ALIGNMENT	Sublet	89.95 *	0.0*
28	702017	BDY	REMOVE/REPLACE	Wheel	220 401 24 02	515.00	0.3
29	700527	MCH	REMOVE/REPLACE	R Frt Susp Strut Assy	220 320 54 13	1,630.00	1.0 #
30	702521	GLS	REMOVE/REPLACE	W/Shield Glass	215 670 26 01	1,220.00	INC #
31	700911	REF	REFINISH	R Pillar Cover			C 0.5
32	700912	REF	REFINISH	L Pillar Cover			C 0.5
33	700920	BDY	REMOVE/INSTALL	L Rocker Trim Panel Cover			0.4
34	700921	BDY	REMOVE/INSTALL	R Cow/Dash Pillar Trim Cover	Existing		0.3 r
35	700922	BDY	REMOVE/INSTALL	L Cow/Dash Pillar Trim Cover	Existing		0.3 r
36	700929	BDY	REMOVE/REPLACE	R Rocker Side Trim Panel	215 698 02 54	480.00	1.0
37	AUTO	REF	REFINISH	R Side Trim Panel			C 1.0
38	701032	REF	REFINISH	R Frt Door Outside			C 1.9
39	701050	BDY	REMOVE/INSTALL	R Frt Belt Moulding			0.3
40	701052	BDY	REMOVE/INSTALL	R Frt Door Moulding			0.3
41	701054	BDY	REMOVE/INSTALL	R Frt Door Mirror			0.3
42	701134	BDY	REMOVE/INSTALL	R Frt Door Handle			0.3
43	900500	BDY *	REPAIR	GLASS CLEAN UP	Sublet	100.00 *	0.0*
44	701192	BDY	REMOVE/REPLACE	Roof Panel (Alum)	215 650 06 09	1,690.00	27.0
45	AUTO	REF	REFINISH	Roof Panel			C 3.2
46	701197	BDY	REMOVE/REPLACE	Frt Roof Header Panel	215 650 02 01	398.00	2.5 #
47	702550	BDY	REMOVE/REPLACE	Panel Bonding Adhesive	215 986 00 00	420.00	
48	701208	BDY	REMOVE/REPLACE	Roof Headliner	215 690 07 50	1,180.00	0.5
49	701261	REF	BLEND	R Quarter Panel Outside			C 1.0
50	701262	REF	BLEND	L Quarter Panel Outside			C 1.0
51	701269	REF	REFINISH	R Fuel Door			INC #
52	701292	BDY	REMOVE/INSTALL	R Quarter Fuel Door	Existing		0.3 r
53	701309	BDY	REMOVE/INSTALL	R Quarter Panel Moulding			0.3
54	701310	BDY	REMOVE/INSTALL	L Quarter Panel Moulding			0.3
55	701548	BDY	REMOVE/INSTALL	R Rear Combination Lamp			0.4
56	701549	BDY	REMOVE/INSTALL	L Rear Combination Lamp			0.4
57	701584	BDY	REMOVE/INSTALL	Rear Bumper Assy			1.2
58	AUTO	REF	ADD'L OPR	Clear Coat			4.3*
59	AUTO		ADD'L COST	Paint/Materials		613.20 *	
60	AUTO		ADD'L COST	Shop Materials		24.05 *	
61	AUTO		ADD'L COST	Hazardous Waste Disposal		10.95 *	

* - Judgment Item
 # - Labor Note Applies
 C - Included in Clear Coat Calc
 r - CEG R&R Time Used For This Labor Operation



DAVE'S TOW-A-WAY, INC.
 "Don't Rave, Call Dave"
 P.O. Box 51003
 DURHAM, NC 27717
 (919) 544-7152

Road Service

DATE <u>7-10-11</u>	TIME	A.M. / P.M.	REQUESTED BY	P.O. NO.
NAME [REDACTED]			PHONE	
ADDRESS [REDACTED]				
CITY [REDACTED]			STATE	ZIP
LOCATION OF VEHICLE <u>I-85W/218</u>				
YEAR, MAKE, MODEL <u>04 CL500</u>			COLOR <u>gold</u>	DRIVER <u>NW</u>
STATE	LIC. PLATE NO.	VEHICLE I.D. NO. <u>WDBR375J44A</u>		REGISTERED OWNER
MILEAGE		SERVICE TIME		EXTRA PERSON
FINISH		FINISH		FINISH
START		START		START
TOTAL		TOTAL		TOTAL
REASON FOR TOW				SPECIAL EQUIPMENT
<input checked="" type="checkbox"/> ACCIDENT <input type="checkbox"/> ARREST <input type="checkbox"/> UNREGISTERED <input type="checkbox"/> TOW ZONE <input type="checkbox"/> SNOW REMOVAL				<input type="checkbox"/> SINGLE LINE WINCHING <input type="checkbox"/> DUAL LINE WINCHING <input type="checkbox"/> SNATCH BLOCKS <input type="checkbox"/> SCOTCH BLOCKS <input type="checkbox"/> DOLLY
<input type="checkbox"/> ABANDONED <input type="checkbox"/> STOLEN CAR <input checked="" type="checkbox"/> BREAK DOWN <input type="checkbox"/> LOCK OUT <input type="checkbox"/> START				
<input type="checkbox"/> FLAT TIRE <input type="checkbox"/> OUT OF GAS <input type="checkbox"/> IMPOUNDED				
<input type="checkbox"/> OWNER <input type="checkbox"/> DEALER				
TYPE OF TOW		TOWED PER ORDER OF		VEHICLE TOWED TO
<input type="checkbox"/> SLING/HOIST TOW <input type="checkbox"/> FLAT BED/RAMP <input type="checkbox"/> WHEEL LIFT <input type="checkbox"/>		<input type="checkbox"/> STATE POLICE <input checked="" type="checkbox"/> LOCAL POLICE <input type="checkbox"/> OWNER <input type="checkbox"/> DEALER		FIRST TOW <u>Henderson NC</u> SECOND TOW <u>Swings MTD.</u>
STORAGE FROM <u>NW</u> <u>AAA Overmillage</u>			TOWING CHARGE	
TO _____ DAYS @ \$ _____			MILEAGE CHARGE	
PAID BY			EXTRA PERSON	
<input type="checkbox"/> CASH <input type="checkbox"/> CHECK <input checked="" type="checkbox"/> MC <input type="checkbox"/> VISA <input type="checkbox"/> AMEX EXP. DATE _____ DRIVERS LIC. NO. <u>04524B</u>			SPECIAL EQUIPMENT	
CC NO. _____			LABOR CHARGE	
OPERATOR'S SIGNATURE _____ DATE _____			STORAGE	
TRUCK NO. _____			SUB-TOTAL	
AUTHORIZED SIGNATURE _____ DATE _____			TAX	<u>4.20</u>
VEHICLE RELEASED TO _____ DATE _____			TOTAL	

45833

Not responsible for loss or damage to vehicle in case of fire, theft or any other cause beyond our control.

Thank You

PRODUCT 2525

[Redacted]

[Redacted]

Driver [Redacted] Suffix [Redacted]
Address [Redacted]

Driver _____ First _____ Middle _____ Last _____ Suffix _____
Address _____

City WALDORF State MD Zip [Redacted]
Same Address on Driver's License? Yes No
Driver's Phone Numbers H (_____) W (_____) [Redacted]

City _____ State _____ Zip _____
Same Address on Driver's License? Yes No
Driver's Phone Numbers H (_____) W (_____) _____

D.L. # [Redacted] State MD
DOB [Redacted] mm/dd/yyyy

D.L. # _____ State _____
DOB [Redacted] mm/dd/yyyy

Owner [Redacted] Same as Driver?
Address [Redacted] Same Address as Driver?
City CHESAPEAKE BEACH State MD Zip [Redacted]

Owner _____ Same as Driver?
Address _____ Same Address as Driver?
City _____ State _____ Zip _____

Plate # [Redacted] State MD
VIN WDBP37S344A
Vehicle Make MERC Vehicle Year 04

Plate # _____ State _____
VIN _____
Vehicle Make _____ Vehicle Year _____

Insurance Company ALLSTATE
Policy # [Redacted]

Insurance Company _____
Policy # _____

[Redacted]

[Redacted]

252-438-8101

9-15

AM 930

MM 218

N.C. 85

Date of Crash 7/16/11 County VANCO Non-Reportable

Date of Crash _____ County _____ Non-Reportable

Officer Name TRE FULLER Local Report Number 110716043CA

Officer Name _____ Local Report Number _____

DRIVER EXCHANGE FORM
Compliments of the
Division of Motor Vehicles

DRIVER EXCHANGE FORM
Compliments of the
Division of Motor Vehicles

[REDACTED]
Chesapeake Bch, MD [REDACTED]
July 30, 2011

Michelin North America, Inc.
P.O. Box 19001
Greenville, South Carolina 29602
Attn: David Hanus, HNA - 4B

Dear Mr. Hanus,

Please note: My Mercedes CL500 was determined to be a total loss at the amount of \$15,938.64 and the estimated \$4,000 for electronics repair.

Sincerely,

[REDACTED]



August 08, 2011

[REDACTED]
Chesapeak Bch, MD [REDACTED]

Dear [REDACTED]

Thank you for allowing Michelin to examine your 225/55R17 Michelin Primacy MXV4 tire. We are always concerned when a consumer has experienced anything less than total satisfaction with our products and services and we welcome the opportunity to investigate and respond in such cases.

Our technical staff's examination of your tire, DOT #B98KEFIX4707, disclosed a 1"x12" cut/snag through the DOT sidewall between 8 :00 and 10:00 (using the DOT number as a reference point of 12:00). This was caused from the tire coming in contact with an unknown object or obstruction, which cut and abraded through the sidewall rubber and polyester casing plies causing a rapid loss of air.

As the subject tire was damaged due to a sidewall cut (road hazard injury) and shows no indication of a material or workmanship condition, we must respectfully deny your claim.

Arrangement will be made to have the tire returned to you at the above address in the near future. A check for \$69.74 will follow to cover your shipping cost.

Sincerely,


Terry Vanchoff
Consumer Claims Manager

Michelin North America, Inc.

One Parkway South
P.O. Box 19001
Greenville, South Carolina 29602-9001
Tel: 864/458-5000

CLAIM INFORMATION

Print your responses. Failure to complete every section may delay action.

NAME: [Redacted]

ADDRESS: [Redacted]

Chesapeake Beach, MD [Redacted]

Home Phone # [Redacted] Work # () _____

Vehicle: Year 19 OR 2004 Make/Model Mercedes CL500

Vehicle Mileage 88,500 Tire Mileage 16,000

Tire: Brand Michelin Tire Size 225-55R17 Tread Design MXV4 Primacy

1. When did the incident occur? Date: 7-16-11 9:15 am

2. Where did the incident occur? City Vance County State NC

3. What happened? Rt. front tire blew out + car went down embankment from left lane + hit a sign post + came back out onto the road into the right lane to rest.

4. Were there any personal injuries? Yes ___ No X
(If yes, please explain) _____

5. Are you filing a personal injury claim? Yes ___ No X

6. What part of your vehicle was damaged? Windshield, Roof, Front Bumper Cover, Grill, Radiator, AC coil, Oil Pan, Steering Apparatus, Rubber Skirting under car, Electronics above dash + 3 Airbags

7. What was the wheel position of the tire? Driver Side: Front ___ Rear ___
Passenger Side: Front X Rear ___

8. Has your tire been replaced? Yes ___ No X
If yes: PLEASE INCLUDE A COPY OF THE REPLACEMENT INVOICE WITH THIS FORM...

9. Is your Insurance Company handling your claim & repairing your vehicle?
Yes ___ No X
If yes: IT IS THE RESPONSIBILITY OF YOUR INSURANCE COMPANY TO SUBROGATE US ON YOUR BEHALF - PLEASE CONTACT THEM TO PURSUE YOUR CLAIM

Your Signature: [Redacted]

Date July 30-2011



August 08, 2011

[REDACTED]
Chesapeake Bch, MD [REDACTED]

Dear [REDACTED]

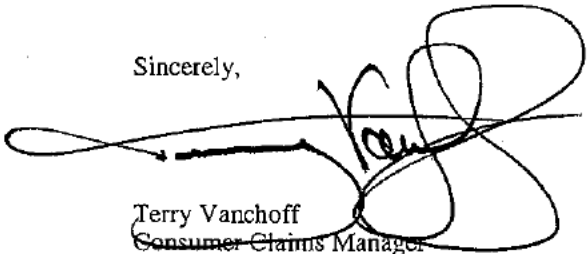
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Consumer Claims Manager

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One Parkway South
P.O. Box 19001
Greenville, South Carolina 29602-9001
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