

 INFORMATION ACT (FOIA), 5 U.S.C. 552(B)(6) DOT Auto Safety Hotline U.S. Department of Transportation National Highway Traffic Safety Administration 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 DEC 16 2011 03-NOV-2011 Repository ☐ Reference No. 10434077	
OWNER INFORMATION (Type or Print)			
Name		Daytime Telephone Number	
Address		Evening Telephone Number	
City COLUMBUS	State OH	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 WDCGG8HB4A		Make MERCEDES BENZ	Model CLK350
Date Purchased	Dealer's Name and Telephone Number CROWN EURO CARS		Model Year 2010
Original Owner ☒	Dealer's City DUBLIN	Engine: No: Cylinders 6	Fuel Type: Gasoline
State OH	Zip Code 43017		
Transmission Type Auto	☒ Antilock Brakes ☒ Cruise Control	Powertrain AWD	Multiple Failure: Incident Date(s) 15-JUN-2010
FAILED COMPONENT(S)/PART(S) INFORMATION			
Vehicle Component Code: 030000 SERVICE BRAKES, HYDRAULIC		Failure Mileage 14000	Failure Speed 5
ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A TIRE FAILURE			
Tire Make Continental	Tire Model (Name or Number) N/A	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 2010 MERCEDES-BENZ CLK350. THE CONTACT TATED WHILE DEPRESSING THE BRAKES HE NOTICED THAT THE PEDAL WOULD GO STRAIGHT TO THE FLOOR BOARD. THE VEHICLE WAS TAKEN TO A DEALER WHO ADVISED HIM THAT THE VEHICLE WAS ACTING AS IT SHOULD. THE VEHICLE WAS NOT REPAIRED. THE MANUFACTURER WAS CONTACTED AND OFFERED NO ASSISTANCE. THE FAILURE MILEAGE WAS APPROXIMATELY 14,000.			
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.			

Narrative Description of Incident(s), Failure(s), Crash(es), and Injury(ies)

BRAKES OPERATE POORLY, DUE TO EXCESSIVE BRAKE PEDAL TRAVEL. SAID SYMPTOM CAUSES LATE BRAKE RESPONSE AND MAKES OPERATION OF OUR VEHICLE UNSAFE. ABOVE SYMPTOM HAD DEVELOPED OVER TIME, BEGINNING IN EARLY 2010. DEALERSHIP AND MBNA REFUSE TO REPAIR, OR ACKNOWLEDGE THE ISSUE.

ATTACH ADDITIONAL SHEETS IF NECESSARY

U.S. Department
of Transportation

**National Highway
Traffic Safety
Administration**

1200 New Jersey Avenue SE.
Washington, D.C. 20077-9382

Official Business
Penalty for Private Use \$300

COLUMBUS OH 432

06 DEC 2011 PM 11

POSTAGE
NECESSARY
IF MAILED
IN THE
UNITED STATES

BUSINESS REPLY MAIL

FIRST-CLASS MAIL

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WASHINGTON, DC

POSTAGE WILL BE PAID BY ADDRESSEE

**US Department of Transportation
National Highway Traffic Safety Administration
Office of Defects Investigation, NVS-210
1200 New Jersey Avenue SE.
Washington, D.C. 20077-9382**



**Think your vehicle
has a safety defect?**



If so:

**Use the enclosed
form to file a report.**

or visit:

www.safercar.gov

or call:

**Vehicle Safety Hotline
888-327-4236**



Vehicle Owner's Questionnaire (VOQ)
U.S. Department of Transportation
National Highway Traffic Safety Administration