


From: [Wells, Cynthia CTR \(NHTSA\)](#)
To: [Fogle, Brenda CTR \(NHTSA\)](#)
Subject: FW: Reference No. 10442681
Date: Thursday, January 26, 2012 1:06:35 PM
Attachments: [NHTSA Ref 10442681.pdf](#)



www.safercar.gov

From: Williams, Maritza CTR (NHTSA) **On Behalf Of** DataQuality, DataQuality (NHTSA)
Sent: Thursday, January 26, 2012 1:03 PM
To: Wells, Cynthia CTR (NHTSA)
Subject: FW: Reference No. 10442681

From: [REDACTED]
Sent: Thursday, January 26, 2012 1:01 PM
To: DataQuality, DataQuality (NHTSA)
Subject: Reference No. 10442681

 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 06-JAN-2012		Repository <input type="checkbox"/> Reference No. 10442681		
OWNER INFORMATION (Type or Print)					
Name [REDACTED]			Daytime Telephone Number [REDACTED]		E-mail Address [REDACTED]
Address [REDACTED]			Evening Telephone Number [REDACTED]		
City THOUSAND OAKS	State CA	Zip Code [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 4JGAB57E14A [REDACTED]		Make MERCEDES BENZ	Model ML350	Model Year 2004	
Date Purchased 2004	Dealer's Name and Telephone Number Silverstar A.G., LTD 805-371-5400		Engine: No: Cylinders 6	Fuel Type: Gas Unl	
Original Owner <input checked="" type="checkbox"/>	Dealer's City Thousand Oaks	State CA	Zip Code 91362		
Transmission Type Auto	<input checked="" type="checkbox"/> Antilock Brakes <input checked="" type="checkbox"/> Cruise Control	Powertrain Auto AWD	Multiple Failure:	Incident Date(s) 03-JAN-2012	
FAILED COMPONENT(S)/PART(S) INFORMATION					
Vehicle Component Code: 140000 AIR BAGS			Failure Mileage 55000	Failure Speed 15	
ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A TIRE FAILURE					
Tire Make Michelin	Tire Model (Name or Number) Michelin - Latitude® Tour HP		Tire Size (Example P215/65R15) 275/55R17 109V		
DOT No. (Example: DOTM19ABC036)	<input type="checkbox"/> Original Equipment <input type="checkbox"/> 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 <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Fire <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Number of Persons Injured 1	Number of Deaths	Reported to Police N Yes	
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 OWNED A 2004 MERCEDES BENZ ML350. THE CONTACT STATED THAT THE DRIVER WAS TRAVELING APPROXIMATELY 15 MPH WHEN SHE CRASHED INTO ANOTHER VEHICLE. THE AIR BAGS DID NOT DEPLOY. THE VEHICLE WAS DESTROYED AND THE DRIVER SUFFERED INJURIES. THE VEHICLE WAS TOWED TO A TOWING YARD AND THE FAILURE WAS NOT DIAGNOSED. THE MANUFACTURER WAS NOT MADE AWARE OF THE FAILURE. THE FAILURE AND THE CURRENT MILEAGES WERE 55,000.					
Mercedes -Benz was made aware of the incident by phone and e-mailed pictures. They contacted Farmers Insurance and placed an emergency hold on vehicle before it went to auction. Mercedes advised me that they will inspect the 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 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.					