

INFORMATION Redacted PURSUANT TO THE FREEDOM OF



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 **24-FEB-2012**
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OWNER INFORMATION (Type or Print)

Name [REDACTED]
Address [REDACTED]
City **SAN ANTONIO** State **TX** 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: **2MEFM74W35X [REDACTED]**
Make: **MERCURY** Model: **GRAND MARQUIS** Model Year: **2005**
Date Purchased: **7-1-05** Dealer's Name and Telephone Number: **North Park Lincoln 210-341-8841** Engine: **4.6L** Fuel Type: **Unleaded Gasoline**
Original Owner: Dealer's City: **San Antonio** State: **TX** Zip Code: **78216** No: Cylinders: **V8**
Transmission Type: **4 speed automatic** Antilock Brakes Powertrain: **Rear wheel Drive** Multiple Failure: Incident Date(s): **01-JUN-2011**
 Cruise Control

FAILED COMPONENT(S)/PART(S) INFORMATION

Vehicle Component Codes: 150000 SEAT BELTS, 140000 AIR BAGS
Failure Mileage: **41450** 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: DOTM9ABC036) 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: **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 2005 MERCURY GRAND MARQUIS. THE CONTACT STATED THAT THE AIR BAG WARNING LIGHT ILLUMINATED UPON STARTING THE VEHICLE. THE VEHICLE WAS TAKEN TO AN INDEPENDENT MECHANIC WHERE THE SEAT BELTS WERE REPLACED BECAUSE THE PRETENSIONERS HAD FAILED. THE MANUFACTURER WAS MADE AWARE OF THE FAILURE AND OFFERED NO ASSISTANCE. THE FAILURE MILEAGE WAS 41,450.
Both Front Driver and Passenger seat belts had to be replaced.

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.