

 <p>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</p>		FOR AGENCY USE ONLY 100148	
U.S. Department of Transportation National Highway Traffic Safety Administration		Date Received SEP 21 2012	Repository <input type="checkbox"/> Reference No. 10472347
OWNER INFORMATION (Type or Print)		Daytime Telephone Number [REDACTED]	E-mail Address [REDACTED]
Name [REDACTED]		Evening Telephone Number same	
Address [REDACTED]		City BURLINGTON State VT 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 4M2ZU86E64U [REDACTED]		Make MERCURY	Model MOUNTAINEER
Model Year 2004		Engine: No. Cylinders 6	Fuel Type: reg. oil.
Date Purchased 7/15/12	Dealer's Name and Telephone Number DUNCAN'S AUTO VT # 457		Original Owner <input type="checkbox"/>
Dealer's City Colchester, VT	State VT	Zip Code 05401	Incident Date(s) 01-AUG-2012
Transmission Type AUTOMATIC	<input type="checkbox"/> Antilock Brakes <input checked="" type="checkbox"/> Cruise Control	Powertrain 4w	Multiple Failure: [REDACTED]
FAILED COMPONENT(S)/PART(S) INFORMATION			
Vehicle Component Code: 180000 VEHICLE SPEED CONTROL (See comments on reverse)		Failure Mileage 80000	Failure Speed 65
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)	<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 type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Fire <input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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 2004 MERCURY MOUNTAINEER. WHILE DRIVING APPROXIMATELY 65 MPH, THE CONTACT DEACTIVATED THE CRUISE CONTROL WHEN THE VEHICLE SUDDENLY STALLED. THE FAILURE ALSO RECURRED WHEN DRIVING AT SLOWER SPEEDS OR WHEN DECELERATING WITH THE CRUISE CONTROL ACTIVATED. THE VEHICLE WAS TAKEN TO AN INDEPENDENT MECHANIC FOR DIAGNOSTIC TESTING. THE MECHANIC STATED THERE WAS A RECALL AND REFERRED THE CONTACT TO THE MANUFACTURER. THE MANUFACTURER WAS MADE AWARE OF THE FAILURE AND STATED THERE WAS A MANUFACTURER'S VOLUNTARY RECALL ISSUED BUT THE CONTACT'S VIN WAS NOT INCLUDED IN THE RECALL. THE VEHICLE WAS NOT REPAIRED. THE APPROXIMATE FAILURE MILEAGE WAS 80,000.			
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.			

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

When the subject failure occurred, the car was being driven on an interstate (89). Upon failure, it appears there was a total shutdown of the on board computer, because power steering and power brakes also failed. Recovery required getting car stopped on the shoulder and turning of ignition. This was not a good way to discover this problem, but fortunately there was not heavy traffic at the time.

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

BURLINGTON VT 054

12 SEP 2012 PM 2 T



NO POSTAGE NECESSARY IF MAILED IN THE UNITED STATES

BUSINESS REPLY MAIL
FIRST-CLASS MAIL PERMIT NO. 1888 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

NHTSA

U.S. Department of Transportation
National Highway Traffic Safety Administration
Office of Defects Investigation