

 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 FEB 28 2013 14-JAN-2013		Repository ☐ Reference No. 10492850	
OWNER INFORMATION (Type or Print)					
Name		Daytime Telephone Number		E-mail Address	
Address		Evening Telephone Number			
City	State	FL	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		Make		Model	
WDBPJ78J11A		MERCEDES BENZ		CL-600	
Model Year		Engine:		Fuel Type:	
2001		No: Cylinders			
Date Purchased	Dealer's Name and Telephone Number				
Original Owner	Dealer's City	State	Zip Code		
Transmission Type	☐ Antilock Brakes	Powertrain	Multiple Failure:	Incident Date(s)	
	☐ Cruise Control			08-JAN-2013	
FAILED COMPONENT(S)/PART(S) INFORMATION					
Vehicle Component Code: 020000 SUSPENSION				Failure Mileage	Failure Speed
				179000	5
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)		☐ 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	Fire	Number of Persons Injured	Number of Deaths	Reported to Police	
☐ Yes ☒ No	☐ Yes ☒ No	0	0	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 2001 MERCEDES BENZ CL-600. THE CONTACT STATED WHILE DRIVING APPROXIMATELY 5 MPH THE ABC LIGHT ILLUMINATED. THE VEHICLE WAS TAKEN TO AN INDEPENDENT MECHANIC WHO ADVISED HIM THE HYDRAULIC LINE FRACTURED AND NEEDED TO BE REPLACED. APPROXIMATELY TWO DAYS LATER WITH THE VEHICLE IN IDLE MODE, HE HEARD A LOUD BURST. THE VEHICLE WAS LATER TAKEN TO AN INDEPENDENT MECHANIC WHO STATED ANOTHER HYDRAULIC LINE FRACTURED AND NEEDED TO BE REPLACED. THE VEHICLE WAS REPAIRED. THE MANUFACTURER WAS CONTACTED AND ADVISED HIM THAT THE VEHICLE WAS INCLUDED IN NHTSA CAMPAIGN ID NUMBER 04V228000 (SUSPENSION), BUT WAS REPAIRED IN 2005. THE FAILURE AND CURRENT MILEAGES WAS APPROXIMATELY 179,000.					
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.					

DATE: _____

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