


MAR 20 2014

 <p>U.S. Department of Transportation National Highway Traffic Safety Administration</p>		<p><b>DOT Auto Safety Hotline</b> <b>Vehicle Owner's Questionnaire</b> To Report Vehicle Safety Defects 1-888-DASH-2-DOT (1-888-327-4236) INTERNET: www.nhtsa.dot.gov/hotline</p>		<p>FOR AGENCY USE ONLY 100148</p>	
<p><b>OWNER INFORMATION (Type or Print)</b></p>		<p>Date Received 13-JAN-2014</p>		<p>Repository <input type="checkbox"/> Reference No. 10559561</p>	
<p>Name [REDACTED]</p>		<p>Daytime Telephone Number [REDACTED]</p>		<p>E-mail Address [REDACTED]</p>	
<p>Address [REDACTED]</p>		<p>Evening Telephone Number [REDACTED]</p>			
<p>City FLORENCE</p>		<p>State SC</p>		<p>Zip Code [REDACTED]</p>	
<p><i>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).</i></p>					
<p><b>VEHICLE INFORMATION</b></p>					
<p>17 digit Vehicle Identification Number Located at bottom of windshield on driver's side 2FALP71W3TX [REDACTED]</p>		<p>Make FORD</p>		<p>Model CROWN VICTORIA</p>	
<p>Model Year 1996</p>		<p>Engine: No: Cylinders 8</p>		<p>Fuel Type: gas</p>	
<p>Date Purchased 2000</p>		<p>Dealer's Name and Telephone Number NC Law Enforcement</p>			
<p>Original Owner <input type="checkbox"/></p>		<p>Dealer's City</p>		<p>State Zip Code</p>	
<p>Transmission Type <input type="checkbox"/> Antilock Brakes <input type="checkbox"/> Cruise Control</p>		<p>Powertrain</p>		<p>Multiple Failure: Incident Date(s) 18-OCT-2003</p>	
<p><b>FAILED COMPONENT(S)/PART(S) INFORMATION</b></p>					
<p>Vehicle Component Code: ENGINE (PWS) INTake manifold</p>				<p>Failure Mileage 150000</p>	
<p>Failure Speed 55</p>					
<p><b>ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A TIRE FAILURE</b></p>					
<p>Tire Make</p>		<p>Tire Model (Name or Number)</p>		<p>Tire Size (Example P215/65R15)</p>	
<p>DOT No. (Example: DOTM19ABC036)</p>		<p><input type="checkbox"/> Original Equipment <input type="checkbox"/> Prior Repair</p>		<p>Failure Location:</p>	
<p>Tire Component Code</p>				<p>Tire Failure Type:</p>	
<p><b>ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A CHILD SEAT FAILURE</b></p>					
<p>Make:</p>		<p>Date Manufactured:</p>		<p>Model No./Name:</p>	
<p>Seat Type:</p>		<p>Installation System:</p>			
<p>Child Seat Component Code:</p>		<p>Failed Part:</p>			
<p><b>APPLICABLE INCIDENT INFORMATION</b> <i>(Please describe in detail the incident(s), failure(s), crash(es), and injury(ies).)</i></p>					
<p>Crash <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p>		<p>Fire <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p>		<p>Number of Persons Injured 0</p>	
				<p>Number of Deaths 0</p>	
<p>Reported to Police N</p>					
<p><b>Narrative Description of Incident(S), Crash(es), and Injury(ies).</b> 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).</p>					
<p>TL* THE CONTACT OWNS A 1996 CROWN VICTORIA. THE CONTACT STATED THAT WHILE DRIVING APPROXIMATELY 55 MPH, THE VEHICLE STALLED WITHOUT WARNING. THE VEHICLE WAS TOWED TO AN INDEPENDENT MECHANIC, WHO DIAGNOSED THAT THERE WAS A SMALL FRACTURED IN THE MANIFOLD. THE VEHICLE WAS NOT REPAIRED. THE CONTACT STATED THAT THE MANIFOLD FAILURE WAS RECURRING. THE MANUFACTURE WAS MADE AWARE OF THE PROBLEM. THE APPROXIMATE FAILURE MILEAGE WAS 150,000.</p>					
<p>It was repaired twice. We had the vehicle towed to Florence and repaired (122 miles) this was 2003. The replaced manifold went out again in 2013. We had it repaired again. I feel that this a manufacturer's defect + should pay for the repairs</p>					
<p>Include, if available: Police/Fire Department Report, Photos, and Repair Invoice. ATTACH ADDITIONAL SHEETS IF NECESSARY</p>					
<p>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.</p>					



U.S. Department  
of Transportation  
**National Highway  
Traffic Safety  
Administration**

1200 New Jersey Avenue SE  
Washington, DC 20590

Dear Consumer:

NVS-216rr

As a follow-up to your report to the Vehicle Safety Hotline (VSH), we have recorded your information on the enclosed Vehicle Owner's Questionnaire (VOQ) form. Please review the form and make changes, additions and corrections as necessary. Additionally, please provide a more detailed description of the failure(s) you reported that you believe relevant to safety. Also, if available, include copies of repair invoices, letters to the manufacturer, or any other document related to the problem(s) you reported. If a crash or fire occurred, include a copy of the police or fire department report.

It is helpful to be as thorough as possible in your report so that our ability to use your report will be maximized. If you do not have the information, it is not necessary to complete all the boxes. However, it is very difficult to identify the scope of a vehicle problem unless the vehicle identification number (VIN) is known. The VIN is located inside the vehicle on the dashboard adjacent to the left (driver's side) of the windshield pillar and on the drivers' door or the driver's door jam. It may also be listed on a dealer repair invoice or your insurance or registration cards. When reporting a tire problem, the brand name, tire line and complete tire size should be included. Be certain to provide the DOT tire identification number. It is usually located near the rim flange of the tire on either side of the tire.

We do not make your personal information (name, address, phone numbers, etc.) available to the general public. However, if we open an investigation that involves your vehicle, we will provide the manufacturer of your vehicle with a complete copy of your report. The information you provide may assist the manufacturer and NHTSA in determining if a safety-related defect exists.

Any information provided is entirely voluntary. There is no consequence or penalty of any kind if you do not wish to provide it. We seek this information to develop both statistical and investigative evidence that will help identify potential safety related problems in vehicles or vehicle equipment, e.g., tires, child safety seats, jacks, etc.

When completed, please fold and staple or tape the form so that the pre-addressed portion of the form is on the outside. If a larger envelope is used, tape the VOQ form to the larger envelope so that the pre-addressed portion of the form is showing.

*I could not  
find address  
on form*

If further assistance is needed, please contact the VSH at their toll-free number, 1-888-327-4236.

Thank you for your cooperation.

Sincerely,

Randy Reid Chief

Correspondence Research Division  
Office of Defects Investigation  
Enforcement

Enclosure: VOQ



15+ break down



**ACTION FORD MERCURY, INC.**  
1000 151 BY PASS W.  
HARTSVILLE, SOUTH CAROLINA 29550

1-800-922-0244

Phone - (843) 383-5121

Customer information area with a large blank space for notes.

CUSTOMER NO.	CUST. P.O. NO.	SHIP VIA	PAY	SOLD BY	INVOICE DATE	INVOICE NO.
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B I L L T O

QUANTITY		PART NUMBER / DESCRIPTION	BIN	LIST	NET	AMOUNT
SHIP	D.O.					
		pd chk [redacted] Kim				

**AS IS**

THE ONLY WARRANTIES APPLYING TO THIS PART(S) ARE THOSE WHICH MAY BE OFFERED BY THE MANUFACTURER. THE SELLING DEALER HEREBY EXPRESSLY DISCLAIMS ALL WARRANTIES, EITHER EXPRESS OR IMPLIED, INCLUDING ANY IMPLIED WARRANTIES OF MERCHANTABILITY OR FITNESS FOR A PARTICULAR PURPOSE, AND NEITHER ASSUMES NOR AUTHORIZES ANY OTHER PERSON TO ASSUME FOR IT ANY LIABILITY IN CONNECTION WITH THE SALE OF THIS PART(S) AND/OR SERVICE. BUYER SHALL NOT BE ENTITLED TO RECOVER FROM THE SELLING DEALER ANY CONSEQUENTIAL DAMAGES, DAMAGES TO PROPERTY, DAMAGES FOR LOSS OF USE, LOSS OF TIME, LOSS OF PROFIT, OR INCOME, OR ANY OTHER INCIDENTAL DAMAGES.

SUB-TOTAL	327.33
<b>PAY THIS AMOUNT</b>	

**RETURNED PARTS MUST BE IN ORIGINAL AND UNDAMAGED CONTAINER**

All claims and returned goods must be accompanied by this bill.

No returns on electrical or special ordered items. No refunds after 10 days. 15% charge on all returned parts.

No returns on electrical or special ordered items. No refunds after 10 days.

X \_\_\_\_\_  
X \_\_\_\_\_  
SIGNATURE



Page: 1 of 1  
 209 S MAIN ST  
 DARLINGTON, SC 29532  
 843 393-4544

PS Bal: 99.99

Customer Information	Order Information
<p>[REDACTED]</p> <p>FLORENCE, SC [REDACTED]</p> <p>PHONE..... [REDACTED]</p> <p>PO NUMBER.. [REDACTED]</p>	<p>INVOICE NUMBER.. 1016619518 05</p> <p>COMM SPECIALIST. WILSON, SHERMIN L</p> <p>ORDER DATE..... 1/27/2014 1:13p</p> <p>QUOTE DELIVERY.. 01/27/2014 01:40p</p>

Qty	Sku	Description	Items	Sugg. List	Cost	Core	Amount
1	540047	615-178 INTAKE MANIFOLD		484.98	242.49	0.00	<del>242.49</del>
		Dorman Intake Manifold					
1	547034	PRA003 FULL PEAK LONG L		29.98	14.99	0.00	14.99
		Peak Long Life Antifreeze & Coolant					

**NO VEHICLE GIVEN For The Above Items**


**OUTSTANDING CORES 3+ DAYS**

Core Bank: 25.00

C637 DISC BRAKE CALIPER

**NO VEHICLE GIVEN For The Above Items**

MSDS can be ordered upon request

<p>10166195180012714C</p> 	<p>Payment    Apprv    Amount</p> <p>****    ****    ****    7273 00610B    257.48</p>
	<p>Subtotal                    257.48</p> <p>Tax                            0.00</p> <p>Total                        257.48</p> <p>AZC Savings                -7.50</p>

