


JUL 22 2014

 DOT Auto Safety Hotline U.S. Department of Transportation National Highway Traffic Safety Administration	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 29-APR-2014		Repository <input type="checkbox"/> Reference No. 10585465	

OWNER INFORMATION (Type or Print)				Daytime Telephone Number	E-mail Address
Name		Address			
City	State	Zip Code		Evening Telephone Number	

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			Make MERCURY	Model GRAND MARQUIS	Model Year 2005
Date Purchased	Dealer's Name and Telephone Number		Engine: No: Cylinders	Fuel Type:	
Original Owner <input type="checkbox"/>	Dealer's City	State	Zip Code	V-8	GAS
Transmission Type AUTO	<input checked="" type="checkbox"/> Antilock Brakes	Powertrain R.W.D.	Multiple Failure:	Incident Date(s) 21-APR-2014	

FAILED COMPONENT(S)/PART(S) INFORMATION		
Vehicle Component Code: LIGHTING (PWS)	Failure Mileage:	Failure Speed:

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				
<i>(Please describe in detail the incident(s), Failure(s), Crash(es), and injury (ies).)</i>				
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 2005 MERCURY GRAND MARQUIS. THE CONTACT RECEIVED A NOTICE FOR A MANUFACTURER'S RECALL AND WAS INFORMED THAT THE PART COULD NOT BE REPLACED IF HE WAS NOT EXPERIENCING A FAILURE BUT FELT THAT IT SHOULD BE REPLACED BEFORE A FAILURE OCCURRED. THE MANUFACTURER WAS NOTIFIED OF THE ISSUE. THE CONTACT HAD NOT EXPERIENCED A FAILURE.

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.

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

I am not original owner



ATTACH ADDITIONAL SHEETS IF NECESSARY

US 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




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



Vehicle Owner's Questionnaire (VOC)
U.S. Department of Transportation
National Highway Traffic Safety Administration





Ford Motor Company
Ford Customer Service Division
P. O. Box 1904
Dearborn, Michigan 48121

888-327 4236



22241/187295/0632



MORGANTOWN, KY

Complaint #
10585465
April 2014

Customer Satisfaction Program 14N01
Programa de Satisfacción del Cliente 14N01

2005 Grand Marquis

Your Vehicle Identification Number: 2MEFM74W35X

At Ford Motor Company, it has been our goal for more than 100 years to provide customers with high-quality, dependable products. In order to maintain these standards, Ford Motor Company is providing additional coverage under Customer Satisfaction Program 14N01 for your vehicle, with the Vehicle Identification Number shown above.

What is the reason for this additional coverage program?

On your vehicle, it may be possible that an electronic module (Lighting Control Module) that supplies power to the headlights may fail. This results in the headlamps not working properly except for the flash-to-pass operation.

In the interest of customer satisfaction, Ford Motor Company is extending the limited warranty on the Lighting Control Module to 15 years or 250,000 miles from the warranty start date of the vehicle, whichever occurs first.

This coverage exceeds the original warranty coverage provisions of your vehicle for this part.

What will Ford and your dealer do?

If the headlamps on your vehicle do not work properly and the module is the cause, Ford Motor Company has authorized your dealer to replace the module free of charge (parts and labor).

This is a one-time repair program.

If your vehicle has already exceeded the mileage limit, this coverage will last through October 31, 2014. Coverage is automatically transferred to subsequent owners.

How long will it take?

If the component mentioned above requires replacement, the time needed for this repair is less than one-half day. However, due to service scheduling requirements, your dealer may need your vehicle for a longer period of time.

What should you do?

You do not need to return to your dealer for this repair unless you experience both headlights not functioning properly when the headlight switch is "ON."

**What should
you do?
(Continued)**

Please keep this letter as a reminder of the extended warranty coverage for your Lighting Control Module. If this component requires replacement, and your vehicle is within the indicated time/mileage limitations, contact your dealer for a service date. Provide the dealer with the Vehicle Identification Number (VIN) of your vehicle and request a service date for Customer Satisfaction Program 14N01. The VIN is printed near your name at the beginning of this letter. Your dealer will replace the part at no charge.

If you do not already have a servicing dealer, you can access www.Fordowner.com for dealer addresses, maps, and driving instructions.

**Have you
previously paid
for this repair?**

If you paid for this repair before the date of this letter, you may be eligible for a refund. Refunds will only be provided for service related to headlights where the cause was the Lighting Control Module. To verify eligibility and expedite reimbursement, give your paid original receipt to your dealer before October 31, 2014. To avoid delays, do not send receipts to Ford Motor Company.

**What if you no
longer own this
vehicle?**

If you no longer own this vehicle, and have an address for the current owner, please forward this letter to the new owner.

You received this notice because our records, which are based primarily on state registration and title data, indicate that you are the current owner.

**Can we assist
you further?**

If you have difficulties getting your vehicle repaired promptly and without charge, please contact your dealership's Service Manager for assistance.

RETAIL OWNERS: If you still have concerns, please contact the Ford Motor Company Customer Relationship Center at 1-866-436-7332 and one of our representatives will be happy to assist you. For the hearing impaired call 1-800-232-5952 (TDD). Representatives are available Monday through Friday: 8:00AM - 8:00PM (Eastern Time).

Si necesita ayuda o tiene alguna pregunta, por favor llame al Centro de Relación con Clientes al 1-866-436-7332 y presione 2 para Español.

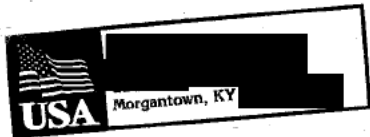
If you wish to contact us through the Internet, our address is: www.Fordowner.com.

FLEET OWNERS: If you still have concerns, please contact the Fleet Customer Information Center at 1-800-34-FLEET, Option #3 and one of our representatives will be happy to assist you. Representatives are available Monday through Friday: 8:00AM - 8:00PM (Eastern Time).

Or you may contact us through the Internet at www.fleet.ford.com.

Thank you for your attention to this important matter and remember to save this letter in case you need to take advantage of this additional coverage program.

Ford Customer Service Division



NASHVILLE TN 370

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US DEPARTMENT OF TRANSPORTATION
NATIONAL HIGHWAY TRAFFIC SAFETY ADMINISTRATION
OFFICE OF DEFECTS INVESTIGATION, NVS-210
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