

INFORMATION Redacted PURSUANT TO THE FREEDOM OF

INFORMATION ACT (EOIA) 5 U.S.C. 552(B)(6)

Form Approved: O.M.B. No. 2127-0008



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

Date Received	Repository <input type="checkbox"/>
15-JAN-2015	Reference No. 10672671

OWNER INFORMATION (Type or Print)			
Name	[Redacted]		
Address	[Redacted]		
City	State	Zip Code	Evening Telephone Number
LEXINGTON	SC	[Redacted]	[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	Make	Model	Model Year
1LNHM82VX6Y [Redacted]	LINCOLN	TOWN CAR	2006
Date Purchased	Dealer's Name and Telephone Number	Engine:	Fuel Type:
9/2009	Stivers Out of Business	No: Cylinders	Unlead
Original Owner	Dealer's City	State	Zip Code
<input type="checkbox"/>	Columbia	SC	87
Transmission Type	<input checked="" type="checkbox"/> Antilock Brakes	Powertrain	Multiple Failure:
Auto	<input checked="" type="checkbox"/> Cruise Control		Incident Date(s)
			12-JAN-2015

FAILED COMPONENT(S)/PART(S) INFORMATION	
Vehicle Component Code: 140000 AIR BAGS	Failure Mileage 130000 112,000
	Failure Speed 40

ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A TIRE FAILURE		
Tire Make	Tire Model (Name or Number)	Tire Size (Example P215/65R15)
Kumho	SOL4S	
DOT No. (Example: DOTM19ABC036)	<input type="checkbox"/> Original Equipment <input type="checkbox"/> Prior Repair	Failure Location:
Tire Component Code	Tire Failure Type: Recall	

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	Fire	Number of Persons Injured	Number of Deaths	Reported to Police
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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 2006 LINCOLN TOWN CAR. WHILE DRIVING APPROXIMATELY 40 MPH, THE AIR BAG WARNING INDICATORS ILLUMINATED AND A CHIME ACTIVATED. THE FAILURE RECURRED ON MULTIPLE OCCASIONS. THE VEHICLE WAS TAKEN TO A DEALER. THE TECHNICIAN DIAGNOSED THAT THE AIR BAGS FAILED. THE VEHICLE WAS NOT REPAIRED AND THE MANUFACTURER WAS NOTIFIED. THE APPROXIMATE FAILURE MILEAGE WAS 130,000. THE VIN WAS UNAVAILABLE.

Auto taken to dealer because of recall on drive steering shaft inspection  
Nothing was done

Include, if available: Police/Fire Department Report, Photos, and Repair Invoice. ATTACHMENTS: [Redacted]

The Privacy Act of 1974-Public Law 93-579 This information is requested pursuant to authority vested in the National Highway Traffic Safety Administration by 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.

FAX TO: EVOQ  
(202) 366-1767

FROM: [REDACTED]

DATE: February 9, 2015

RE: NHTSA: Follow-Up to ODI Complaint 10672671

Please see attached completed complaint.

Thanks for your assistance.

[REDACTED]  
Lexington SC [REDACTED]