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	Repository ☐
03-MAR-2015	Reference No. 10691873

OWNER INFORMATION (Type or Print)

Name	[redacted]	Daytime Telephone Number [redacted]	E-mail Address
Address	[redacted]	Evening Telephone Number	
City JACKSONVILLE	State FL	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	Make	Model	Model Year
WDBNG70J21A[redacted] INSTRUMENT CLUSTER	MERCEDES BENZ	S430	2001

Date Purchased	Dealer's Name and Telephone Number			Engine: No: Cylinders	Fuel Type:
1/2004	BRUMOS MOTOR CARS INC			8	
Original Owner ☐	Dealer's City JACKSONVILLE	State FL	Zip Code 32225		

Transmission Type			Multiple Failure:	Incident Date(s)
AUTOMATIC	☑ Antilock Brakes ☑ Cruise Control	Powertrain		21-FEB-2015

FAILED COMPONENT(S)/PART(S) INFORMATION

Vehicle Component Codes: 162000 STRUCTURE: BODY, 110000 ELECTRICAL SYSTEM	Failure Mileage	Failure Speed
	185000	55

ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A TIRE FAILURE

Tire Make	Tire Model (Name or Number)	Tire Size (Example P215/65R15)
GOODYEAR		
DOT No. (Example: DOTMAL9ABC036)	☐ 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 S430. THE CONTACT STATED THAT WHILE DRIVING AT APPROXIMATELY 55 MPH, THERE WAS A BURNING ODOR COMING FROM THE DASHBOARD. THE VEHICLE WAS NOT DIAGNOSED OR REPAIRED. THE MANUFACTURER WAS NOT NOTIFIED OF THE FAILURE. THE FAILURE MILEAGE WAS 185,000.

MERCEDES BENZ USA HAS BEEN CONTACTED.
CASE # [redacted]

Include, if available: Police/Fire Department Report, Photos, and Repair Invoice. ATTACH ADDITIONAL SHEETS IF NECESSARY

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

As i stated car was being driving a burn smell. And later the Instrument cluster went out blank dark cant see nothing. Called Service Advisor Jeb Lypreos he informed me it would be about 1628.85 to replace and reprogram the Instrument Cluster. I have had it repair. I have filed with our office of the State Attorney General. I just feel it isn't right to the customer if yw repair a car in 2006 that's when the warranty should star. not going back to 2000.

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

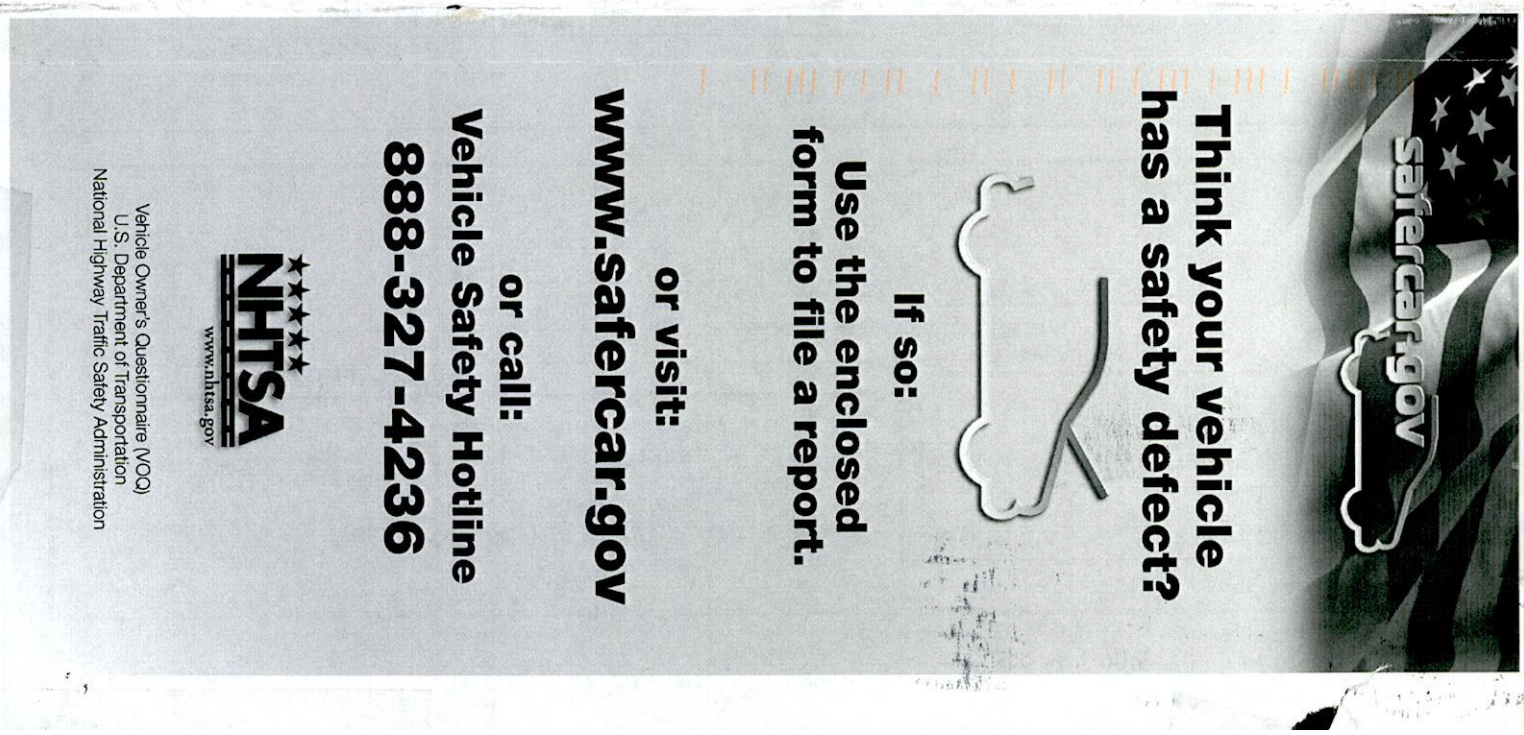
Official Business
Penalty for Private Use $300

**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



Office of the Attorney General

Please return completed consumer contact form to:
Office of Attorney General Pam Bondi
State of Florida
PL-01, The Capitol
Tallahassee, Florida 32399-1050

Consumer Contact Form

The contact information MUST be provided as we correspond via U.S. mail. *Incomplete forms cannot be processed.* PLEASE WRITE LEGIBLY. Only one business per complaint form.

Person Making Complaint:

Miss/Ms. [redacted]
Mrs./Mr.
Last Name, First Name, Middle Initial

Mailing Address [redacted]

City, County
JACKSONVILLE
State, Zip Code
FLORIDA [redacted]
Home & Business Phone, including Area Code

[redacted]
Email Address

Complaint is Against:

MERCEDES BENZ USA
Name/Firm/Company

BRMOUS MERCEDES BENZ
Mailing Address
10231 ATLANTIC BLVD
City, County
JACKSONVILLE FL
State, Zip Code FLORIDA 32225

Business Phone, including Area Code
904 - 724-1080
Business Email or Web Address

Product or Service involved: INSTRUMENT CLUSTER Amount Paid: $ 1628.85

Date of Transaction: MARCH 10, 2015 I was contacted ___ Telephone ✓ Mail ___ Other

Have you retained an attorney? ☐ Yes ☑ No

Did you sign a contract or other papers, i.e. estimates, invoices, or other supporting documents? ☐ Yes ☑ No

If you filed complaints with any other governmental and/or consumer agencies about this matter, please list those agencies: NHTSA, FEDERAL TRADE COMMISSION

(ATTACH COPIES. DO NOT SEND ORIGINALS.)

Note:
1. All documents and attachments submitted with this complaint are subject to public inspection pursuant to Chapter 119, Florida Statutes.
2. Whoever knowingly makes a false statement in writing with the intent to mislead a public servant in the performance of his official duty shall be guilty of a misdemeanor of the second degree, punishable as provided in s. 775.082, s.775.083, or s.837.06 Florida Statutes.

Please indicate if you are over the age of 60. Penalities can be enhanced for victimizing senior citizens. Over 60 ☐ Yes ☐ No

(PLEASE USE OTHER SIDE OF THIS FORM TO DESCRIBE YOUR COMPLAINT & ATTACH YOUR SIGNATURE)

CUSTOMER #: [redacted]

[redacted]

INVOICE

DUPLICATE 2
PAGE 1

Mercedes-Benz
Mercedes-Benz of Orange Park
7018 Blanding Blvd.
Jacksonville, Florida 32244
Direct Parts: (904) 253-7341
Fax# (904) 253-7340

[redacted]
JACKSONVILLE, FL [redacted]
HOME: [redacted] CONT: [redacted]
BUS: CELL:

Repair Shop Registration Number:
SERVICE ADVISOR: 201 TED KYPREOS

COLOR	YEAR	MAKE/MODEL	VIN	LICENSE	MILEAGE IN / OUT	TAG
BLK	01	MERCEDES BENZ S430V	WDBNG70J21A[redacted]		184038/184038	TG332

DEL. DATE	PROD. DATE	WARR. EXP.	PROMISED	PO NO.	RATE	PAYMENT	INV. DATE
18AUG00 DD		07AUG2004	17:30 10MAR15		129.95	CASH	10MAR15

R.O. OPENED	READY	OPTIONS: STK: [redacted] DLR: [redacted] ENG: 113941-30-219301
08:51 06MAR15	14:50 10MAR15	1) 220170-1S-[redacted]

LINE	OPCODE	TECH	TYPE	HOURS	LIST	NET	TOTAL
A	CUSTOMER STATES: I HEREBY ACKNOWLEDGE THAT I HAVE REMOVED ANY FIRE ARMS AND/OR PERSONAL ITEMS FROM MY VEHICLE. I ALSO AGREE THAT MERCEDES-BENZ OF ORANGE PARK WILL NOT BE RESPONSIBLE FOR ANY ARTICLES LEFT IN MY VEHICLE WHILE AT MERCEDES- BENZ OF ORANGE PARK						
	78	ACKNOWLEDGEMENT OF PERSONAL ITEMS					
		1156	CP		0.00	0.00	
PARTS: 0.00 LABOR: 0.00 OTHER: 0.00 TOTAL LINE A: 0.00							
B	CUSTOMER STATES: MB LOANER VEH BEING PROVIDED WHILE REPAIRS ARE BEING MADE TO YOUR VEHICLE AT A VALUE OF $50.00 PER DAY. IF LOANER IS NOT RETURNED ON FINISHED DATE A CHARGE OF $100.00 PER DAY WILL BE ADDED TO THIS REPAIR ORDER.						
	76	MB LOANER VEH BEING PROVIDED WHILE REPAIRS ARE BEING MADE TO YOUR VEHICLE AT A VALUE OF $50.00 PER DAY. IF LOANER IS NOT RETURNED ON FIINISHED DATE A CHARGE OF $100.00 PER DAY WILL BE ADDED TO THIS REPAIR ORDER.					
		1156	CP		0.00	0.00	
PARTS: 0.00 LABOR: 0.00 OTHER: 0.00 TOTAL LINE B: 0.00							
C	CUSTOMER STATES: PERFORM MULTI-POINT INSPECTION						
	MPI	PERFORM MULTI-POINT INSPECTION					
		1156	CP		0.00	0.00	
PARTS: 0.00 LABOR: 0.00 OTHER: 0.00 TOTAL LINE C: 0.00							
D	WALK AROUND ATTACHED.						
	85	COMPLIMENTARY QUICK WASH					
		1156	CP		0.00	0.00	
PARTS: 0.00 LABOR: 0.00 OTHER: 0.00 TOTAL LINE D: 0.00							
E	CUSTOMER STATES INSTRUMENT CLUSTER INOPERATIVE. CHECK AND ADVISE. SUDDENLY IT HAS BECOME INTERMITENT. CHECK AND ADVISE.						
	546023	INSTRUMENT CLUSTER EXCHANGE (AFTER CHECK)					

WARRANTY STATEMENT AND DISCLAIMER: PLEASE SEE THE DEALERSHIP'S LIMITED WARRANTY ON THE REVERSE SIDE OF THIS REPAIR INVOICE.

By signing below, you acknowledge that you were notified of and authorized the Dealership to perform the services/repairs itemized in this Invoice and that you received (or had the opportunity to inspect) any replaced parts as requested by you. The vehicle is being returned to you in exchange for your payment of the Amount Due.

*SHOP SUPPLY COSTS: We have added a charge equal to 15% of the total cost of labor and parts, not to exceed $28.00, to the Repair Order. This charge represents costs and profits to the motor vehicle repair facility for miscellaneous shop supplies and waste disposal. The State of Florida requires a $1.00 fee to be collected for each new tire sold in the state [s.403.718], and a $1.50 fee to be collected for each new or remanufactured lead-acid battery sold in the state [s.403.7185].

ALL PARTS ARE NEW UNLESS OTHERWISE INDICATED.

DESCRIPTION	TOTALS
LABOR AMOUNT	
PARTS AMOUNT	
GAS, OIL, LUBE	
SUBLET AMOUNT	
MISC. CHARGES *	
TOTAL CHARGES	
LESS INSURANCE	
SALES TAX	
PLEASE PAY THIS AMOUNT	

DATE CUSTOMER SIGNATURE AUTHORIZED DEALERSHIP REPRESENTATIVE SIGNATURE

CUSTOMER COPY

CUSTOMER #: [redacted]

[redacted]

INVOICE

DUPLICATE 2
PAGE 2

Mercedes-Benz
Mercedes-Benz of Orange Park
7018 Blanding Blvd.
Jacksonville, Florida 32244
Direct Parts: (904) 253-7341
Fax# (904) 253-7340

[redacted]
JACKSONVILLE, FL [redacted]
HOME: [redacted] CONT: [redacted]
BUS: [redacted] CELL: [redacted]

Repair Shop Registration Number:
SERVICE ADVISOR: 201 TED KYPREOS

COLOR	YEAR	MAKE/MODEL	VIN	LICENSE	MILEAGE IN / OUT	TAG
BLK	01	MERCEDES BENZ S430V	WDBNG70J21A[redacted]		184038/184038	TG332

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18AUG00 DD		07AUG2004	17:30 10MAR15		129.95	CASH	10MAR15

R.O. OPENED	READY	OPTIONS: STK:[redacted] DLR:[redacted] ENG:113941-30-219301
08:51 06MAR15	14:50 10MAR15	1)220170-1S-[redacted]

LINE OPCODE TECH TYPE HOURS		LIST	NET	TOTAL
	1156 CC1		209.90	209.90
1	220-540-79-47-88 INSTRUMENT CLUSTER	1352.00	1284.40	1284.40
1	220-540-79-47-70 INSTRUMENT CLUSTER	359.10	359.10	359.10
-1	220-540-79-47-70 INSTRUMENT CLUSTER	359.10	359.10	-359.10

PARTS: 1284.40 LABOR: 209.90 OTHER: 0.00 TOTAL LINE E: 1494.30

184038 cluster faulty verified instrument cluster not lighting correctly and center display inoperative, fuses ok, power and ground to cluster are ok. replaced instrument cluster, labor 2.0hrs

****

F CUSTOMER STATES REAR GLASS ANTENNA IS COMING UP A BIT. POSSIBLY GLUE COMING LOSE PER CUSTOMER. CHECK AND ADVISE.

CAUSE: F

828951 MOBILE PHONE ANTENNA REPLACE (AFTER CHECK)

1156 WM3 (N/C)

1 220-817-00-21 ADHESIVE FOIL (N/C)

PARTS: 0.00 LABOR: 0.00 OTHER: 0.00 TOTAL LINE F: 0.00

184038 adhesive failure replaced adhesive on rear glass antenna. ANTENNA REPLACED PREVIOUSLY

****

CUSTOMER PAY SHOP SUPPLIES/HAZARDOUS WASTE DISPOSAL FOR REPAIR ORDER 28.00

TEMP CONTACT: 9049932319

ALL REPLACEMENT PARTS ARE NEW UNLESS OTHERWISE INDICATED.

PAID
PAID MAR 10 2015 PAID
BY: DeLoff

WARRANTY STATEMENT AND DISCLAIMER: PLEASE SEE THE DEALERSHIP'S LIMITED WARRANTY ON THE REVERSE SIDE OF THIS REPAIR INVOICE.

By signing below, you acknowledge that you were notified of and authorized the Dealership to perform the services/repairs itemized in this Invoice and that you received (or had the opportunity to inspect) any replaced parts as requested by you. The vehicle is being returned to you in exchange for your payment of the Amount Due.

DA[redacted] THORIZED DEALERSHIP REPRESENTATIVE SIGNATURE

*SHOP SUPPLY COSTS: We have added a charge equal to 15% of the total cost of labor and parts, not to exceed $28.00, to the Repair Order. This charge represents costs and profits to the motor vehicle repair facility for miscellaneous shop supplies and waste disposal. The State of Florida requires a $1.00 fee to be collected for each new tire sold in the state [s.403.718], and a $1.50 fee to be collected for each new or remanufactured lead-acid battery sold in the state [s.403.7185].

ALL PARTS ARE NEW UNLESS OTHERWISE INDICATED.

DESCRIPTION	TOTALS
LABOR AMOUNT	209.90
PARTS AMOUNT	1284.40
GAS, OIL, LUBE	0.00
SUBLET AMOUNT	0.00
MISC. CHARGES *	28.00
TOTAL CHARGES	1522.30
LESS INSURANCE	0.00
SALES TAX	106.55
PLEASE PAY THIS AMOUNT	1628.85

MERCEDES BENZ OF OP
7018 BLANDING BLVD
JACKSONVILLE, FL 32244

03/10/2015 17:48:30

DEBIT CARD

EDS SALE

CARD #	XXXXXXXXXX[redacted]
INVOICE	
SEQ #:	0007
Batch #:	001074
Approval Code:	362825
Entry Method:	Swiped
Mode:	Online

SALE AMOUNT **$1628.85**

CUSTOMER COPY

Please explain your complaint. Attach additional sheets, if necessary.

I PURCHASE A S430 MERCEDES BENZ 2001 IN NOVEMBER 2004. VIN # WDBNG70J21A [redacted]
NASTA RECALL CAMPAIGN NUMBER 06V028000
DATE INVESTATION OPENDED NOVEMBER 10, 2005
DATE INVESTATION CLLOSED FEBRUARY 8, 2006
CALLED BROMOS MERCEDES BENZ IN ORAGE PARK, FLORIDA
TALKED TO TED KYPREOS HE SAID THE INSMENT CLUSTER
HAD A 10 YEAR WARRANTY. HE SAID IT EXPIRE IN 2010
BECAUSE THEY WENT BACK TO THE ORSINAL DATE OF RELEASE
OF THE CAR IN 2000. MY COMPLAINT IS IF ITS A
RECALL AND THE INSTRUMENT CLUSTER WAS REPLACED IN
2006. WHY WOULD YOU GO BACKWARDS AND TAKE 5 YEARS
FROM THE CUSTOMER SIVING THE CUSTOMER ONLY 4 YEAR
WARRANTY. I JUST DONT THINK ITS FAIR TO THE CUSTOMER
IF ITS A 10 YEAR WARRANTY. IT SHOULD EXPRIE IN 2016.
I HAVE BEEN A CUSTOMER OF BROMUS Mercedes FOR OVER
10 YEARS. I HOPE THIS OFFICE WOULD UNDERSTAND WHAT
IM SAYING. A WARRANTY SHOULD BESINS FROM THE TIME
OF THE SERVICE. I TALKED TO RONNIE UNDERWOOD SHE
TELLING ME A DIFFERENT STORY FROM TED KYPREOS. SHE IS
SAYING ONE YEAR. MERCEDES BENZ IS TO BIG OF A COMPANY
TO TAKE ADVANTAGE OF THE CUSTOMER