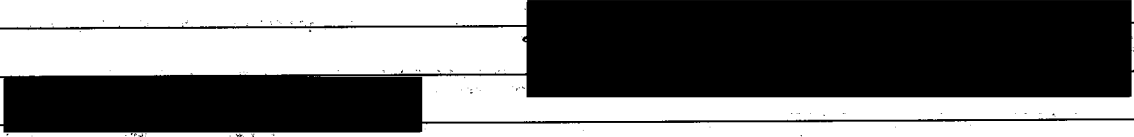
 <p>U.S. Department of Transportation National Highway Traffic Safety Administration</p>		<p>DOT Auto Safety Hotline Vehicle Owner's Questionnaire To Report Vehicle Safety Defects 1-888-DASH-2-DOT (1-888-327-4236) INTERNET: www.nhtsa.dot.gov/hotline</p>		<p>FOR AGENCY USE ONLY 100612</p>	
<p>OWNER INFORMATION (Type or Print)</p>		<p>Date Received: 12-SEP-2017 OCT 18 2017</p>	<p>Repository <input type="checkbox"/></p>	<p>Reference No. 10985188</p>	
<p>Name: [REDACTED]</p>		<p>Daytime Telephone Number: [REDACTED]</p>	<p>E-mail Address:</p>	<p>Evening Telephone Number:</p>	
<p>Address: [REDACTED]</p>		<p>City: TOLLAND</p>	<p>State: CT</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 align="center">VEHICLE INFORMATION</p>					
<p>17 digit Vehicle Identification Number Located at bottom of windshield on driver's side JA3AD69F04U [REDACTED]</p>		<p>Make MITSUBISHI</p>	<p>Model LANCER</p>	<p>Model Year 2004</p>	
<p>Date Purchased:</p>	<p>Dealer's Name and Telephone Number:</p>		<p>Engine: No: Cylinders 4</p>	<p>Fuel Type: Gas</p>	
<p>Original Owner <input type="checkbox"/></p>	<p>Dealer's City:</p>		<p>State:</p>	<p>Zip Code:</p>	
<p>Transmission Type:</p>	<p><input type="checkbox"/> Antilock Brakes</p>	<p>Powertrain FRONT WHEEL DRIVE</p>	<p>Multiple Failure: 1</p>	<p>Incident Date(s) 01-NOV-2015</p>	
<p><input type="checkbox"/> Cruise Control</p>					
<p align="center">FAILED COMPONENT(S)/PART(S) INFORMATION</p>					
<p>Vehicle Component Code: 021530 SUSPENSION: FRONT: CONTROL ARM: LOWER ARM</p>				<p>Failure Mileage:</p>	<p>Failure Speed:</p>
<p align="center">ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A TIRE FAILURE</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</p>	<p><input type="checkbox"/> Prior Repair</p>	<p>Failure Location:</p>	
<p>Tire Component Code:</p>				<p>Tire Failure Type:</p>	
<p align="center">ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A CHILD SEAT FAILURE</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 align="center">APPLICABLE INCIDENT INFORMATION <i>(Please describe in detail the incident(s), Failure(s), Crash(es), and Injury(ies).)</i></p>					
<p>Crash <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p>	<p>Fire <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p>	<p>Number of Persons Injured:</p>	<p>Number of Deaths:</p>	<p>Reported to Police N</p>	
<p>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).</p>					
<p>2004 MITSUBISHI LANCER WAGON. CONSUMER WRITES IN REGARDS TO CORROSION OF LOWER CONTROL ARM SAFETY RECALL. *LD THE CONSUMER STATED WHILE BACKING OUT OF A PARKING SPACE, THE VEHICLE BACKED INTO A TRUCK AT A HIGH SPEED. UPDATED 09/12/2017*JS</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>					

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

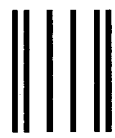
The Car 2004 Mitsubishi Lancer was totaled
the information is complete.
What is your next step to help me?



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

EXECUTIVE SECRETARY
NHTSA
MARCH 17 2 33 PM '07

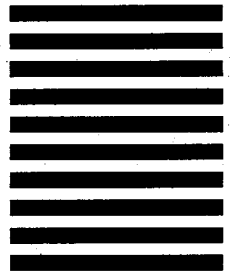


**NO POSTAGE
NECESSARY
IF MAILED
IN THE
UNITED STATES**

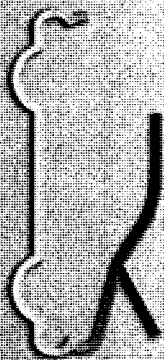
BUSINESS REPLY MAIL
FIRST CLASS MAIL PERMIT NO. 1888 WASHINGTON, DC

POSTAGE WILL BE PAID BY ADDRESSEE

**US Department of Transportation
National Highway Traffic Safety Administration
Office of Defects Investigation, NEF-100
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**



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