 <p>U.S. Department of Transportation National Highway Traffic Safety Administration</p>		<p>INFORMATION ACT (FOIA) 5 U.S.C. 552(B)(6) DOT Auto Safety Hotline</p> <p>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 100148</p>	
<p>Date Received</p> <p>02-AUG-2017 OCT 24 2017</p>		<p>Repository <input type="checkbox"/></p> <p>Reference No. 11012411</p>			
<p>OWNER INFORMATION (Type or Print)</p>					
<p>Name</p> <p>Address</p>		<p>Daytime Telephone Number</p> <p>Evening Telephone Number</p>		<p>E-mail Address</p>	
<p>City CINCINNATI</p>		<p>State OH</p>	<p>Zip Code</p>		
<p>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).</p>					
<p>VEHICLE INFORMATION</p>					
<p>17 digit Vehicle Identification Number Located at bottom of windshield on driver's side 2MEFM75W61X</p>		<p>Make MERCURY</p>	<p>Model GRAND MARQUIS</p>	<p>Model Year 2001</p>	
<p>Date Purchased</p>	<p>Dealer's Name and Telephone Number</p>		<p>Engine: No. of Cylinders 8</p>	<p>Fuel Type: REGULAR</p>	
<p>Original Owner <input type="checkbox"/></p>	<p>Dealer's City</p>	<p>State</p>	<p>Zip Code</p>		
<p>Transmission Type AUL</p>	<p><input checked="" type="checkbox"/> Antilock Brakes <input type="checkbox"/> Cruise Control</p>	<p>Powertrain</p>	<p>Multiple Failure:</p>	<p>Incident Date(s) 02-AUG-2017</p>	
<p>FAILED COMPONENT(S)/PART(S) INFORMATION</p>					
<p>Vehicle Component Code: 180000 VEHICLE SPEED CONTROL</p>			<p>Failure Mileage 88000</p>	<p>Failure Speed 65</p>	
<p>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: DOTM9ABC036)</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>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>APPLICABLE INCIDENT INFORMATION (Please describe in detail the incident(s), Failure(s), Crash(es), and injury(ies).)</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</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>TL* THE CONTACT OWNS A 2001 MERCURY GRAND MARQUIS. THE CONTACT STATED THAT WHILE DRIVING AT 65 MPH, THE VEHICLE ACCELERATED RAPIDLY WITHOUT WARNING. THE CONTACT TRIED TO DEPRESS THE BRAKE PEDAL AND DISENGAGED THE CRUISE CONTROL BUT NEITHER ATTEMPTS TO SLOW THE VEHICLE WERE SUCCESSFUL. THE CONTACT WAS ABLE TO SLOW THE VEHICLE DOWN ONLY BY DEPRESSING THE ACCELERATOR PEDAL AGAIN AFTER A PERIOD OF UNINTENDED ACCELERATION. THE DEALER WAS NOT CONTACTED ABOUT THE FAILURE. THE MANUFACTURER WAS MADE AWARE OF THE ISSUE AND REFERRED THE CONTACT TO THE DEALER. THE FAILURE MILEAGE WAS 88,000.</p>					
<p>* THE VEHICLE'S ACCELERATION BEGAN WHEN I PUSHED ACCERLATOR TO KEEP UP WITH OTHER CARS AND LOCKED AT FULL THROTTLE</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 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.</p>					
<p>* HAD THROTTLE BODY SERVICES-REPAIR SHOP WAS UNABLE TO RECREATE INCIDENT-NO ISSUES SINCE</p>					

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

THROTTLE LOCKED AT FULL ACCELERATION - ACCELERATION
IN HEAVY INTERSTATE TRAFFIC - TURNED OFF CRUISE CONTROL
STILL ACCELERATING - FULL BRAKING KEPT THE CAR AT
68 MPH - BRAKES WERE SMOKING - OUT OF MOVES I PUSHED
THE ACCELERATOR TO THE FLOOR AND THE THROTTLE
RELEASED -
STOP SERVICE OF THE THROTTLE BODY - NO ISSUES SINCE

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



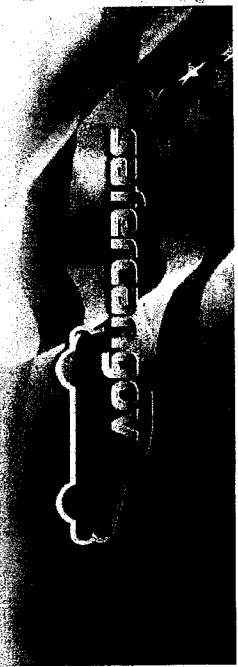
NO POSTAGE
NECESSARY
IF MAILED
IN THE
UNITED STATES



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, 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



Vehicle Owners: Questionnaire (NOI)
U.S. Department of Transportation
National Highway Traffic Safety Administration