



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: 01-MAY-2018  
**FEB 19 2019**  
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**OWNER INFORMATION (Type or Print)**

Name: [REDACTED]  
Address: [REDACTED]  
City: BOWIE State: MD Zip Code: [REDACTED]  
Daytime Telephone Number: [REDACTED] E-mail Address: [REDACTED]  
Evening Telephone Number: [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: **4JGBB22E27A** [REDACTED]  
Make: MERCEDES BENZ Model: ML320 Model Year: 2007  
Date Purchased: NOV 2006 Dealer's Name and Telephone Number: **MERCEDES BENZ ANNAPOLIS 443-875-0300** Engine: No: Cylinders: 6 Fuel Type: DIESEL  
Original Owner:  Dealer's City: ANNAPOLIS, State: MD Zip Code: 21401  
Transmission Type: AUTOMATIC  Antilock Brakes:  Powertrain: 4MATIC Multiple Failure: EGR VALVE Incident Date(s): 27-APR-2018  
 Cruise Control

**FAILED COMPONENT(S)/PART(S) INFORMATION**

Vehicle Component Code: 060000 ENGINE (PWS) 003-542-70-18-T SENSOR 642150 07-56 Failure Mileage: 224000 Failure Speed: 35-45  
**642-140-18-60-EGR 164-490-51-14-80 CATALYST**  
**164-490-08-92-80-PARTICULATE FILTER 642-905-01-00-SENSOR**

**ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A TIRE FAILURE**

Tire Make: [REDACTED] Tire Model (Name or Number): [REDACTED] Tire Size (Example P215/65R15): [REDACTED]  
DOT No. (Example: DOTM19ABC036): [REDACTED]  Original Equipment  Prior Repair Failure Location: [REDACTED]  
Tire Component Code: [REDACTED] Tire Failure Type: [REDACTED]

**ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A CHILD SEAT FAILURE**

Make: [REDACTED] Date Manufactured: [REDACTED] Model No./Name: [REDACTED]  
Seat Type: [REDACTED] Installation System: [REDACTED]  
Child Seat Component Code: [REDACTED] Failed Part: [REDACTED]

**APPLICABLE INCIDENT INFORMATION**

(Please describe in detail the incident(s), failure(s), crash(es), and injury(ies).)

Crash:  Yes  No Fire:  Yes  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 2007 MERCEDES-BENZ ML320. WHILE THE CONTACT WAS MERGING INTO HIGHWAY TRAFFIC, GREEN SMOKE WAS SEEN UNDER THE HOOD OF THE VEHICLE. THE CONTACT PULLED THE VEHICLE OVER TO THE SIDE OF THE ROAD AND TURNED OFF THE ENGINE. PRIOR TO THE FAILURE, THE VEHICLE HESITATED WHILE DRIVING. THE CONTACT POINTED OUT THAT THE VEHICLE WAS EQUIPPED WITH A DIESEL ENGINE. THE VEHICLE WAS TOWED TO THE DEALER (MERCEDES-BENZ OF ANNAPOLIS, 324 6TH ST. ANNAPOLIS, MD 21403, (888) 261-7620) WHERE IT WAS DIAGNOSED WITH CATASTROPHIC ENGINE FAILURE. THE EXHAUST MANIFOLD RUPTURED, WHICH CAUSED THE ENGINE WIRING HARNESS TO MELT. THE DEALER INFORMED THE CONTACT THAT THE VEHICLE WAS DONE. THE CONTACT'S INSURANCE COMPANY WAS NOTIFIED AND THE VEHICLE WAS AWAITING INSPECTION TO DETERMINE IF THE VEHICLE WAS A TOTAL LOSS. THE MANUFACTURER WAS NOT MADE AWARE OF THE FAILURE. THE FAILURE MILEAGE WAS APPROXIMATELY 224,000. THE VIN WAS NOT AVAILABLE. (SMOKE WAS WHITE AND GREY) AVOIDED TOLL FIRE AND MELT DOWN VEHICLE WAS REPAIRED COST \$12,535.00 - INS COVERED 1/2 DUE TO DRIVERS IMMEDIATE ACTIONS.

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 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.

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

THIS VEHICLE 100% MANUFACTURED (DEALER MAINTAINED)  
800 MILES POST SCHEDULED SERVICE, THIS EVENT OCCURED!  
\* CATALYTIC - WAS NOT PRE DIAGNOSED FOR REPLACEMENT / ? MAINTENANCE OF CAT?  
① EGR VALVE DOES NOT HAVE A MAINTENANCE SCHEDULE  
② ENGINE FAILURE - WAS NOT THE REALITY THE INSURANCE FULL COVERAGE  
INVESTIGATION AND PAYMENT SUPPORTED THE REPAIR!  
ENGINE HARNESS MELTED DUE TO EGR VALVE RUPTURE - I.E. MINOR ENGINE  
FIRE, CATALYTIC CONVERTER PARTICULATE FILTERS CLOGGED.

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**  
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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](http://www.safercar.gov)

or call:  
Vehicle Safety Hotline  
888-327-4236



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