

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				FOR AGENCY USE ONLY 100148	
				Date Received 30-JUN-2020		Repository ☐		Reference No. 11331683	
				Daytime Telephone Number [REDACTED]		E-mail Address [REDACTED]		Evening Telephone Number [REDACTED]	
OWNER INFORMATION (Type or Print)									
Name [REDACTED]				Address [REDACTED]					
City PORTLAND		State ME		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 WDDGF8AB5EC [REDACTED]				Make MERCEDES BENZ		Model C300		Model Year 2014	
Date Purchased		Dealer's Name and Telephone Number PRIME MOTORS 207-510-2250				Engine: No: Cylinders		Fuel Type: Reg Unlead	
Original Owner ☐		Dealer's City SCARBOROUGH		State ME		Zip Code 04074			
Transmission Type AUTO		☐ Antilock Brakes ☐ Cruise Control		Powertrain		Multiple Failure:		Incident Date(s) 30-JUN-2020	
FAILED COMPONENT(S)/PART(S) INFORMATION									
Vehicle Component Code: 140000 AIR BAGS						Failure Mileage		Failure Speed	
ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A TIRE FAILURE									
Tire Make		Tire Model (Name or Number)				Tire Size (Example P215/65R15)			
DOT No. (Example: DOTM19ABC036)		☐ 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 ☐ Yes ☒ No		Fire ☐ Yes ☒ No		Number of Persons Injured		Number of Deaths		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* TAKATA RECALL. THE CONTACT OWNS A 2014 MERCEDES BENZ C300. THE CONTACT RECEIVED NOTIFICATION OF NHTSA CAMPAIGN NUMBER: 19V010000 (AIR BAGS) HOWEVER, THE PARTS TO DO THE REPAIR WAS NOT YET AVAILABLE. THE CONTACT STATED THAT THE MANUFACTURER HAD EXCEEDED A REASONABLE AMOUNT OF TIME FOR THE RECALL REPAIR. AN UNKNOWN DEALER WAS CONTACTED AND CONFIRMED THAT THE PARTS WERE NOT AVAILABLE. THE MANUFACTURER WAS MADE AWARE OF THE ISSUE. THE CONTACT HAD NOT EXPERIENCED A FAILURE. VIN TOOL CONFIRMS PARTS NOT AVAILABLE.									
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.									