

OF INFORMATION ACT (FOIA), 5 U.S.C. 552(B)(6)

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	
Name		Date Received		Repository ☐	
Address		03-SEP-2020 OCT 06 2020		Reference No. 11352956	
City		Daytime Telephone Number		E-mail Address	
State		Zip Code		Number	
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 WDBJF65JX2		Make MERCEDES BENZ		Model E320	
Model Year 2002		Date Purchased 2007		Dealer's Name and Telephone Number EASTCOAST AUTO 973-732-3878	
Original Owner ☐		Engine: No. Cylinders 6/8		Fuel Type: GAS	
Dealer's City NEWARK		State NJ		Zip Code 07112	
Transmission Type AUTOMATIC		☒ Antilock Brakes ☒ Cruise Control		Powertrain AWD 4 years/50000 miles	
Multiple Failure:		Incident Date(s) 01-AUG-2020			
FAILED COMPONENT(S)/PART(S) INFORMATION					
Vehicle Component Codes: 130000 VISIBILITY/WIPER (PWS), 134000 VISIBILITY: SUN ROOF ASSEMBLY				Failure Mileage 200000	
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* THE CONTACT OWNS A 2002 MERCEDES BENZ E320. THE CONTACT STATED THAT THE SUN ROOF WAS UNABLE TO BE OPENED AND THAT THE SUN ROOF GLASS HAD BECOME INDENTED. NEITHER THE DEALER NOR THE MANUFACTURER HAD BEEN NOTIFIED OF THE FAILURE. THE CONTACT RECEIVED NOTIFICATION OF NHTSA CAMPAIGN NUMBER: 19V918000 (VISIBILITY) FOR ANOTHER MERCEDES-BENZ VEHICLE WHICH SHE LINKED TO THE VEHICLE. THE VEHICLE WAS NOT REPAIRED, THE FAILURE MILEAGE WAS APPROXIMATELY 200,000.					
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 responses 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 responses, or a statistical summary thereof, may be used in support of the agency's action.					





Fax Cover Sheet

To: NHISA OFFICE

From: [REDACTED]

Re: CASE NO 11332952

Fax #: 202-366-1767 Pages: 4

Phone contact: [REDACTED] Date: 9/29/20