



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

POSTED

Date Received

RECEIVED

OCT -3 PM 1:00

AGENCY USE ONLY
 Od_or _____
 rt_Lft _____
 up_Lft _____
 Reference No.

555343

OWNER INFORMATION (Type or Print)

[Redacted Owner Information]

OFFICE DEFECTS INVESTIGATION

Daytime Telephone Number
 ()

Do you authorize NHTSA to provide a copy of this report to the manufacturer of your vehicle? YES NO
 In the absence of an authorization, NHTSA WILL NOT provide your name or address to the vehicle manufacturer.

Signature of Owner _____ Date 9/22/00

PRODUCT INFORMATION

Vehicle Identification No. (VIN) (Located at bottom of windshield on driver's side) 4 M 2 D U S S P 9 V U J S 3 S 5 8				Make MERCURY	Model MOUNTAINEER	Year 1997
Purchased Date 4/11/97	Dealer's Name MURRAY'S FORD INC			Engine Size (CID/CYL) No Cylinders 3	<input type="checkbox"/> Turbo <input type="checkbox"/> Diesel <input type="checkbox"/> Gas <input checked="" type="checkbox"/> Fuel Injection	
<input checked="" type="checkbox"/> New <input type="checkbox"/> Used	Dealer's City Du Bois PA	State PA	Zip Code 15801	Cruise Control <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Drivetrain <input type="checkbox"/> Front <input type="checkbox"/> Rear <input checked="" type="checkbox"/> 4-Wheel	Vehicle Type <input type="checkbox"/> Car <input checked="" type="checkbox"/> Sport Utility <input type="checkbox"/> Van <input type="checkbox"/> Truck <input type="checkbox"/> Minivan <input type="checkbox"/> Motorcycle <input type="checkbox"/> Other
Manufacture Date (on driver's door or pillar) 3/97	Transmission Type <input type="checkbox"/> Manual <input checked="" type="checkbox"/> Automatic	Restraint System <input checked="" type="checkbox"/> Driverside Air Bag <input checked="" type="checkbox"/> Passengerside Air Bag <input type="checkbox"/> 3-Point Belt <input type="checkbox"/> Motorbell <input type="checkbox"/> 2-Point Belt	Body Style <input type="checkbox"/> 2-Door <input type="checkbox"/> Stationwagon <input type="checkbox"/> Pick Up Truck <input checked="" type="checkbox"/> 4-Door <input type="checkbox"/> Other			

FAILED COMPONENT(S)/PART(S) INFORMATION

Part Name(s) TIRES	Location <input type="checkbox"/> Left <input type="checkbox"/> Front <input type="checkbox"/> Right <input type="checkbox"/> Rear	Failed Part(s) <input checked="" type="checkbox"/> Original <input type="checkbox"/> Replacement	Handicap Adaptive Equip <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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TO BE COMPLETED WHEN REPORTING A TIRE FAILURE

Tire Brand FIRESTONE	Tire Name WILDERNESS AT	Complete Tire Size P235/75R15
No. of Failures	Date(s) of Failure(s) 45250	Mileage at Failure(s)
	Vehicle Speed at Failure(s)	Failed Part(s) Available? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
		NHTSA Previously Contacted? <input type="checkbox"/> Yes <input type="checkbox"/> No

APPLICABLE INCIDENT INFORMATION

Crash <input type="checkbox"/> Yes <input type="checkbox"/> No	Fire <input type="checkbox"/> Yes <input type="checkbox"/> No	Number of Persons Injured	Number of Fatalities	Reported to Manufacturer <input type="checkbox"/> Yes <input type="checkbox"/> No
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Narrative Description of Incident(s), Failure(s), Crash(es), and Injury(ies).
 Separated cord flat repair - only being used as spare tire
 LEFT FRONT TIRE HAS LOUD HUMMING SOUND.
 RIGHT FRONT TIRE HAS NOTICABLE THUMP
 FIVE CRACKS IN LEFT REAR TIRE NEAR TREAD.
 SERIAL NO.
~~LEFT FRONT~~ - W2HZ1PY07 ~~LEFT~~ SERIAL NO SAME ON ALL 5 TIRES

Continue on back.

The Privacy Act of 1974 - Public Law 93-578 This information is requested pursuant to 49 U.S.C. Chapter 301. You are under no obligation to respond to this questionnaire. Your response may be used to assist NHTSA in determining whether a manufacturer should take appropriate action to correct a safety defect. If NHTSA proceeds with administration enforcement or litigation against a manufacturer, your response, or a statistical summary thereof, may be used in support of the agency's action.