



U.S. Department
of Transportation
**National Highway
Traffic Safety
Administration**

Auto Safety Hotline

Vehicle Owner's Questionnaire

**NATIONWIDE 1-800-424-9393
DC METRO AREA (202) 366-0123
INTERNET: <http://www.nhtsa.dot.gov>**

FOR AGENCY USE ONLY 936

Date Received

17-JAN-2002

Ord. or
rt. dt
pd. rt
rp. ltr

Reference No.

8002424

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

Signature of Owner _____ Date ____/____/____

VEHICLE INFORMATION

| | | | | | | |
|---|--|--|---|--|---|---|
| Vehicle Ident. No. (VIN) <small>(Location at bottom of and/or side of dashboard)</small> | Vehicle Make | Vehicle Model | Vehicle Year | Current Odometer Reading | | |
| NOT AVAILABLE | MERCURY | TOPAZ | 1993 | | | |
| Purchase Date <input type="checkbox"/> New <input checked="" type="checkbox"/> Used | Dealer's Name City _____ State _____ Zip Code _____ | Engine Size (CID/CC/L) _____ No Cylinders _____ | <input type="checkbox"/> Turbo <input type="checkbox"/> Diesel <input type="checkbox"/> Gas <input type="checkbox"/> Fuel Injectio | | | |
| Transmission Type <input type="checkbox"/> Manual <input type="checkbox"/> Automatic | Antilock Brakes <input type="checkbox"/> Yes <input type="checkbox"/> No | Restraint System <input type="checkbox"/> 3-Point Belt <input type="checkbox"/> Motorbelt <input type="checkbox"/> Driverside Airbag <input type="checkbox"/> 2-Point Bel <input type="checkbox"/> Passengerside Airbag | Cruise Control <input type="checkbox"/> Yes <input type="checkbox"/> No | Drive Train <input type="checkbox"/> Front <input type="checkbox"/> Rear <input type="checkbox"/> 4-Wheel | Vehicle Type <input type="checkbox"/> Car <input type="checkbox"/> Sport Util <input type="checkbox"/> Van <input type="checkbox"/> Truck <input type="checkbox"/> Minivan <input type="checkbox"/> Motorcycle <input type="checkbox"/> Other _____ | Body Style <input type="checkbox"/> 2-Door <input type="checkbox"/> 4-Door <input type="checkbox"/> Stationwagon <input type="checkbox"/> Pick Up Truck <input type="checkbox"/> Other _____ |

FAILED COMPONENT(S)/PART(S) INFORMATION

| | | | |
|-----------------------|--|--|--|
| Component 08310000 | Part Name(s) ELECTRICAL SYSTEM:WIRING:HARNES:FRONT:UNDERHOOD | Location <input type="checkbox"/> Left <input type="checkbox"/> Right <input type="checkbox"/> Front <input type="checkbox"/> Rear | Failed Part's <input type="checkbox"/> Original <input type="checkbox"/> Replacement |
| No of Failure | Dates of Failure(s) 12-DEC-2001 Mileage at Failure(s) 200000 Vehicle Speed at Failure(s) | Failed Part(s) <input type="checkbox"/> Yes <input type="checkbox"/> No | NHTSA Previously <input type="checkbox"/> Yes <input type="checkbox"/> No |

APPLICATION INCIDENT INFORMATION

(Please describe in detail the incident(s), failure(s), crash(es), and injury(ies) on the back of this form)


| | | | | | |
|---|---|---------------------------|----------------------|--------------------------|---|
| Crash <input type="checkbox"/> Yes <input type="checkbox"/> No | Fire <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No | Number of Persons Injured | Number of Fatalities | Estimated Property Damag | Reported to Polic <input type="checkbox"/> Yes <input type="checkbox"/> No |
|---|---|---------------------------|----------------------|--------------------------|---|

NARRATIVE DESCRIPTION OF FAILURE(S), INCIDENT(S), INJURY(IES)

WHILE DRIVING ENGINE LIGHT REMAINS ON CONTINUOUSLY. DRIVER NOTICED SMOKE COMING FROM UNDERHOOD, TOOK VEHICLE TO DEALER, AND THEY CHANGED ALL SPARK PLUGS AND OIL. THE NEXT DAY CONSUMER PARKED CAR AND LESS THAN 5 MINUTES VEHICLE CAUGHT ON FIRE. PLEASE PROVIDE ANY FURTHER INFORMATION. AK

CONFIDENTIAL - NHTSA

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>U.S. Department of Transportation National Highway Traffic Safety Administration</p> | | <p>DOT Auto Safety Hotline</p> <p>Vehicle Owner's Questionnaire (VOQ)</p> <p>NAT:ONWIDE 1-888-DASH-2-DOT 1-888-327-4236 www.nhtsa.dot.gov/hotline</p> | | <p>FOR AGENCY USE ONLY 335</p> <p>REC'D 02 MAR 19 2006 OFFICE OF INVESTIGATION</p> | |
| <p>OWNER INFORMATION (Type or Print)</p> <p>[Redacted] 734810</p> | | <p>Reference No. 8002424</p> | | <p>Work Number [Redacted] Home Number [Redacted]</p> | |
| <p>Do you authorize NHTSA to provide a copy of report to the manufacturer of your vehicle? In the absence of an authorized NHTSA representative, please provide your name and address to the vehicle manufacturer.</p> <p>Signature of Owner [Redacted] <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO Date 02/25/02</p> | | | | | |
| VEHICLE INFORMATION | | | | | |
| <p>Vehicle Ident. No. (VIN) 2MEPM36X4P0017724 NOT AVAILABLE</p> | | <p>Vehicle Make MERCURY</p> | <p>Vehicle Model TOPAZ</p> | <p>Vehicle Year 1993</p> | <p>Current Odometer Reading</p> |
| <p>Purchase Date 07-17-97 <input type="checkbox"/> New <input checked="" type="checkbox"/> Used</p> | <p>Dealer's Name Hood King City Cisco State TX Zip Code 76448</p> | | <p>Engine Size (CID/CCIL)</p> | <p>No. Cylinders</p> <p><input type="checkbox"/> Turbo <input type="checkbox"/> Diesel <input type="checkbox"/> Gas <input type="checkbox"/> Fuel Injected</p> | |
| <p>Transmission Type <input type="checkbox"/> Manual <input checked="" type="checkbox"/> Automatic</p> | <p>Anti-lock Brakes <input type="checkbox"/> Yes <input type="checkbox"/> No</p> | <p>Restraint System <input type="checkbox"/> 3-Point Belt <input type="checkbox"/> Driver-side Airbag <input type="checkbox"/> Passenger-side Airbag <input type="checkbox"/> Motorbelt <input type="checkbox"/> 2-Point Belt</p> | <p>Cruise Control <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p> | <p>Drive Train <input checked="" type="checkbox"/> Front <input type="checkbox"/> Rear <input type="checkbox"/> 4-Wheel</p> | <p>Vehicle Type <input checked="" type="checkbox"/> Car <input type="checkbox"/> Van <input type="checkbox"/> Minivan <input type="checkbox"/> Other <input type="checkbox"/> Sport Utility Truck <input type="checkbox"/> Motorcycle</p> |
| FAILED COMPONENT(S)/PART(S) INFORMATION | | | | | |
| <p>Component 08310000</p> | <p>Part Name(s) ELECTRICAL SYSTEM; WIRING; HARNESS; FRONT; UNDERHOOD</p> | | <p>Location <input type="checkbox"/> Left <input checked="" type="checkbox"/> Front <input type="checkbox"/> Right <input type="checkbox"/> Rear</p> | <p>Failed Part(s) <input checked="" type="checkbox"/> Original <input type="checkbox"/> Replacement</p> | |
| <p>No of Failures</p> | <p>Date(s) of Failure(s) 12 DEC 2001 - 12-27-01 Mileage at Failure(s) 200000 Vehicle Speed at Failure(s) Parked</p> | | <p>Failed Part(s) <input type="checkbox"/> Yes <input type="checkbox"/> No</p> | <p>NHTSA Previously <input type="checkbox"/> Yes <input type="checkbox"/> No</p> | |
| APPLICATION INCIDENT INFORMATION (Please describe in detail the incident(s), failure(s), crash(es), and injury(ies) on the back of this form) | | | | | |
| <p>Crash <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> | <p>Fire <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p> | <p>Number of Persons Injured 0</p> | <p>Number of Fatalities 0</p> | <p>Estimated Property Damage 4000.00</p> | <p>Reported to Police <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> |
| NARRATIVE DESCRIPTION OF FAILURE(S), INCIDENT(S), INJURY(IES) | | | | | |
| <p>WHILE DRIVING ENGINE LIGHT REMAINS ON CONTINUOUSLY. DRIVER NOTICED SMOKE COMING FROM UNDERHOOD, TOOK VEHICLE TO DEALER, AND THEY CHANGED ALL SPARK PLUGS AND OIL. THE NEXT DAY CONSUMER PARKED CAR AND LESS THAN 5 MINUTES VEHICLE CAUGHT ON FIRE. PLEASE PROVIDE ANY FURTHER INFORMATION. *AK</p> <p>Dealer involved with fire is STAR-Hyundai Dodge in Abilene, Tx, 79605. Not the dealer I bought the car from. I took it in because smoke was coming from</p> | | | | | |
| <p>The Privacy Act of 1974 (Public Law 93-502) 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> | | | | | |

**THE FOLLOWING PAGES ARE WITHHELD TO
PROTECT UNWARRANTED INVASION OF
PERSONAL PRIVACY PURSUANT TO
EXEMPTION 6 OF THE FREEDOM OF
INFORMATION ACT (FOIA), 5 U.S.C. 552(b)(6)**

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