



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 798

Date Received

05-MAR-2002

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

Reference No.

8005021

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 above windshield)</small>	Vehicle Make	Vehicle Model	Vehicle Year	Current Odometer Reading		
1LNLM81W5TY709176	LINCOLN	TOWN CAR	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 checked="" 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 checked="" 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 09202000	Part Name(s) LIGHTING:LAMP OR SOCKET:HEAD LIGHTS	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) 01-FEB-2002 Mileage at Failure(s) 110000 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 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
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NARRATIVE DESCRIPTION OF FAILURE(S), INCIDENT(S), INJURY(IES)

HEADLIGHT LENS WILL CONTINUEOUSLY GET DIRTY FROM THE INSIDE. ALSO, WILL GET MOIST. CONSUMER HAS PROBLEMS AT NIGHT WHEN TURNING ON HEADLIGHTS. CONTACTED DEALER, AND DEALER WANTED TO REPLACE HEADLIGHT LENS.*AK

CONTINUE ON REVERSE

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.

 U.S. Department of Transportation National Highway Traffic Safety Administration	DOT Auto Safety Hotline <h2 style="margin:0;">Vehicle Owner's Questionnaire (VOQ)</h2> NATIONWIDE 1-888-DA3H-2-DOT 1-888-327-4236 www.nhtsa.dot.gov/hotline	FOR AGENCY USE ONLY 798 Date Received: <u>05-MAR-2002</u> Reference No.: <u>8005021</u> Work Number: _____ Home Number: _____ Vehicle? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO Access to the vehicle manufacturer: _____ Date: <u>3/15/02</u>
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OWNER INFORMATION (Type or Print)

Signature of Owner: _____

VEHICLE INFORMATION				
Vehicle Ident. No. (VIN.) (Located at bottom of windshield on driver's side) 1LNLM81W5TY709176	Vehicle Make LINCOLN	Vehicle Model TOWN CAR	Vehicle Year 1993	Current Odometer Reading 110330
Purchase Date: _____	Dealer's Name: <u>For Sale - Over at (Not at East)</u>		Engine Size (CID/CYL): <u>A5</u>	<input type="checkbox"/> Turbo Diesel Gas <input checked="" type="checkbox"/> Fuel Injection
<input type="checkbox"/> New <input checked="" type="checkbox"/> Used	City: <u>Park Hills</u> State: <u>MO</u> Zip Code: <u>63630</u>		No. Cylinders: <u>3</u>	
Transmission Type: <input type="checkbox"/> Manual <input checked="" type="checkbox"/> Automatic	Antilock Brakes: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Restraint System: <input checked="" type="checkbox"/> 3-Point Belt <input type="checkbox"/> Motorcyclist <input checked="" type="checkbox"/> Driverside Airbag <input type="checkbox"/> 2-Point Belt <input checked="" type="checkbox"/> Passengerside Airbag	Cruise Control: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Drive Train: <input checked="" type="checkbox"/> Front <input checked="" type="checkbox"/> Rear <input type="checkbox"/> 4-Wheel
Vehicle Type: <input checked="" type="checkbox"/> Car <input type="checkbox"/> Sport Util Truck <input type="checkbox"/> Van <input type="checkbox"/> Minivan <input type="checkbox"/> Motorcycle <input type="checkbox"/> Other		Body Style: <input type="checkbox"/> 2-Door <input checked="" type="checkbox"/> 4-Door <input type="checkbox"/> Stationwagon <input type="checkbox"/> Pick Up <input type="checkbox"/> Truck		

FAILED COMPONENT(S)/PART(S) INFORMATION			
Component 09202000	Part Name(s) LIGHTING BAMP OR SOCKET HEAD LIGHTS	Location <input checked="" type="checkbox"/> Left <input checked="" type="checkbox"/> Right <input checked="" type="checkbox"/> Front <input type="checkbox"/> Rear	Failed Part(s) <input checked="" type="checkbox"/> Original <input type="checkbox"/> Replacement
No. of Failures 2 Headlights Right and Left	Date(s) of Failure(s): <u>01-FEB-2002</u> Mileage at Failure(s): <u>110000</u> Vehicle Speed at Failure(s): _____	Failed Part(s) <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	NHTSA Previously <input type="checkbox"/> Yes <input checked="" 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 checked="" type="checkbox"/> No	Fire: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Number of Persons Injured: <u>NONE</u>	Number of Fatalities: <u>NONE</u>	Estimated Property Damage: <u>NONE</u>	Reported to Police: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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NARRATIVE DESCRIPTION OF FAILURE(S), INCIDENT(S), INJURY(IES)

HEADLIGHT LENS WILL CONTINUOUSLY GET DIRTY FROM THE INSIDE. ALSO, WILL GET MOIST. CONSUMER HAS PROBLEMS AT NIGHT WHEN TURNING ON HEADLIGHTS. CONTACTED DEALER, AND DEALER WANTED TO REPLACE HEADLIGHT LENS. AK Assembly's DIM HEADLIGHTS CAUSE DRIVERS TO "OVERDRIVE" Lights, even at 50 mph. UNSAFE TO DRIVE LEGAL LIMIT at Nighttime!! I WILL REPORT WHAT FIX MIGHT CORRECT THIS DEFECT.

CONTINUE ON BACK IF NEEDED

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Fold to show Return Address (no writing required) fasten with tape or staple and mail

INFORMATION ON TIRE FAILURE(S) (IF APPLICABLE)

TIRE IDENTIFICATION NO.:

D O T

MANUFACTURER/TIRE NAME

SIZE

* The identification number consists of 7 to 10 letters and numerals following the letters DOT. It is usually located near the rim flange or the side opposite the whitewall or on either side of a blackwall tire.

NARRATIVE DESCRIPTION (CONTINUED)

This Lincoln Towncar is not the only Ford product to show this fault. This is a Fantastic Auto, These Dirty headlights (INSIDE) is the ONLY flaw for this car. Seems that most Ford products in the local mall parking lot also show

This Defect. State inspections on trucks address the issue of Reduced illumination - why not Autos? Why does not Ford/Lincoln have a fix for this problem? I also have a '92 Buick Roadmaster, 110,000 miles, headlights are perfect, which is also a composite light. Of interest, Examined Mo. Lincoln dealer prices these headlights at \$196 each, Lincoln dealers in St. Louis, Mo and Cape Girardeau price is \$94.00, same part numbers! Replacing these headlights with Ford part numbers, does not guarantee this will not be occur, in the near future.

U.S. G.P.O.: 1989 - 622-107 / 2025

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

400 Seventh St., S.W.
Washington, D.C. 20590

Official Business
Penalty for Private Use \$300



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IF MAILED
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U.S. Department of Transportation
National Highway Traffic Safety Administration
Information Management Staff NSA-10.01
400 7th Street, SW
Washington, DC 20590

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