



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 1220

Date Received

29-APR-2002

Ord. or
rt. dt
od. rt
rp. ltr

Reference No.

8008727

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		
UNKNOWN	MERCURY	GRAND MARQUIS	2001			
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 checked="" 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 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 06410000	Part Name(s) FUEL: THROTTLE LINKAGES AND CONTROL: PEDAL	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) _____ Mileage at Failure(s) _____ 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 checked="" 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)

WHILE DRIVING VEHICLE AND UPON BACKING OUT OF DRIVEWAY CONSUMERS FOOT SLIPPED OFF GAS PEDAL, COULD NOT FIND BRAKE PEDAL TO STOP VEHICLE. CONSUMER HIT A PARKED VEHICLE. PLEASE PROVIDE ANY FURTHER INFORMATION, AND VEHICLE IDENTIFICATION.*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.

 <p>U.S. Department of Transportation National Highway Traffic Safety Administration</p>		<p>DOT Auto Safety Hotline</p> <h2>Vehicle Owner's Questionnaire (VOQ)</h2> <p>NATIONWIDE 1-888-DASH-2-DOT 1-888-327-4238 www.nhtsa.dot.gov/hotline</p>		<p>FOR AGENCY USE ONLY 1220</p> <p>Date Received: 02 JUN 19 PM 1:11 29-APR-2002 OFFICE DEFECTS INVESTIGATION</p>	
<p>OWNER INFORMATION (Type or Print)</p> <p>[Redacted] 750676</p> <p>HILLSBOROUGH HILLSBOROUGH NJ [Redacted]</p>				<p>Od. or rt. dt. od. rt. up. ltr. Reference No. 8008727</p>	
<p>Do you authorize NHTSA to provide a copy of report to the manufacturer of your vehicle? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO</p> <p>In the absence of [Redacted] provide your name and address to the vehicle manufacturer.</p> <p>Signature of Owner [Redacted] Date 5/11/2002</p>				<p>Work Number [Redacted] Home Number SAME</p>	
<p>VEHICLE INFORMATION</p>					
<p>Vehicle Ident. No. (VIN) (Located at bottom of windshield on driver's side) 2MEFM7SW21X UNKNOWEN 660286</p>		<p>Vehicle Make MERCURY</p>	<p>Vehicle Model GRAND MARQUIS</p>	<p>Vehicle Year 2001</p>	<p>Current Odometer Reading 4,700 Miles</p>
<p>Purchase Date MAY, 2001</p>	<p>Dealer's Name TOWN + COUNTRY LINCOLN/MERCURY</p>		<p>Engine Size 4.6 (CID/CC/LITER)</p>	<p>No. Cylinders 8</p>	<p><input type="checkbox"/> Turbo Diesel Gas <input checked="" type="checkbox"/> Fuel Injection</p>
<p><input checked="" type="checkbox"/> New <input type="checkbox"/> Used</p>	<p>City SOMERVILLE State N.J. Zip Code 08876</p>		<p>Transmission Type <input type="checkbox"/> Manual <input checked="" type="checkbox"/> Automatic</p>	<p>Antilock Brakes <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p>	<p>Restraint System <input checked="" type="checkbox"/> 3-Point Belt <input type="checkbox"/> Motorbelt <input checked="" type="checkbox"/> Driverside Airbag <input type="checkbox"/> 2-Point Belt <input checked="" type="checkbox"/> Passengerside Airbag</p>
<p>Cruise Control <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p>	<p>Drive Train <input type="checkbox"/> Front <input checked="" type="checkbox"/> Rear <input type="checkbox"/> 4-Wheel</p>	<p>Vehicle Type <input checked="" type="checkbox"/> Car <input type="checkbox"/> Sport Utility Truck <input type="checkbox"/> Minivan <input type="checkbox"/> Other</p>	<p>Body Style <input type="checkbox"/> 2-Door <input checked="" type="checkbox"/> 4-Door <input type="checkbox"/> Stationwagon <input type="checkbox"/> Pick Up Truck</p>		
<p>FAILED COMPONENT(S)/PART(S) INFORMATION</p>					
<p>Component 06410000</p>	<p>Part Name(s) RUELL THROTTLE LINKAGES AND CONTROL PEDAL POORLY DESIGNED AND SPACED GREAT BRAKE PEDALS</p>		<p>Location <input checked="" type="checkbox"/> Left <input type="checkbox"/> Right <input checked="" type="checkbox"/> Front <input type="checkbox"/> Rear</p>	<p>Failed Part(s) <input checked="" type="checkbox"/> Original <input type="checkbox"/> Replacement</p>	
<p>No. of Failures Numerous - But ONLY ONE Caused An Accident</p>	<p>Date(s) of Failure(s) 4-26-2002 (Plus Other Non-ACCIDENT FAILURES)</p>		<p>Mileage at Failure(s) 0</p>	<p>Vehicle Speed at Failure(s) 5-10 MPH</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>					
<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>					
<p>Crash <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p>	<p>Fire <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p>	<p>Number of Persons Injured NONE</p>	<p>Number of Fatalities NONE</p>	<p>Estimated Property Damage None - \$1,000. Other Car Damaged</p>	<p>Reported to Police <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p>
<p>NARRATIVE DESCRIPTION OF FAILURE(S), INCIDENT(S), INJURY(IES)</p>					
<p>WHILE DRIVING VEHICLE AND UPON BACKING OUT OF DRIVEWAY CONSUMER'S FOOT SLIPPED OFF GAS PEDAL, COULD NOT FIND BRAKE PEDAL TO STOP VEHICLE. CONSUMER HIT A PARKED VEHICLE. PLEASE PROVIDE ANY FURTHER INFORMATION, AND VEHICLE IDENTIFICATION. *AK</p> <p>THE LEDGE OF MY SHOE SOLE WAS ENLARGED WITH THE LEDGE OF THE GAS PEDAL - I WAS NOT ABLE TO EXTRICATE MY FOOT WHEN TO PRESS THE BRAKE PEDAL & STOP THE BACKWARD MOTION OF THE CAR & PREVENT THE COLLISION WITH THE OTHER (PARKED) CAR. I ALSO HAD BOUGHT A 1988 MERCURY GRAND MARQUIS FOR 10 YEARS. ON NUMEROUS OCCASIONS (20-30), MY FOOT SLIPPED FROM THE BRAKE PEDAL INTO THE GAS PEDAL, JUST ENOUGH TO FEEL MY FOOT WAS PRESSING BOTH PEDALS - NO ACCIDENTS, BUT I SCARED THE PASSENGERS ON THE PASSENGERS. THE 2001 GRAND MARQUIS BEHAVES IN EXACTLY THE SAME</p>					
<p>CONTINUE ON BACK IF NEEDED</p>					
<p>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 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>					

Narrative Description of Incident(s), Failure(s), Crash(es), and Injury(les)

MANNEN. LUCKY THIS WAS THE ONLY ACCIDENT CAUSED BY THIS DEFECT, AND LUCKY I WAS SKILLFUL ENOUGH WITH MY FOOT CONTROL AND GOOD REFLEXES TO BE ABLE TO AVOID ACCIDENTS. OTHER CARS THAT I HAVE OWNED & NEVER HAD PROBLEMS REMOTELY RESEMBLING THIS WERE A '58 FORD FALCON, 1961 DODGE SEYMOUR, 1972 CHRYSLER IMPERIAL, 1976 DODGE MONACO, A PLYMOUTH, 1998 PONTIAC BONNEVILLE. HAVE OCCASIONALLY DRIVEN A 1985 HONDA ACCORD, A 1992 HONDA ACCORD - NEVER A PROBLEM. IN ADDITION, I HAVE DRIVEN SEVERAL RENTAL CARS IN FRANCE & GERMANY - NEVER ANY PROBLEM WHATSOEVER. ALSO, I HAVE DRIVEN UPWARD OF 15 RENTAL CARS, ON BUSINESS, ON VACATION, & WHEN MY CARS WERE BEING SERVICED - NEVER EVER A PROBLEM OF THE SLIGHTEST DIMENSION. BUT VERY STRANGELY - THE ONLY 2 GRAND MARQUIS THAT I OWNED WERE THE ONLY 2 UNSAFE CARS THAT I OWNED - BOTH WITH SOME IDENTICAL PROBLEMS.

ATTACH ADDITIONAL SHEETS IF NECESSARY

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



NO POSTAGE NECESSARY IF MAILED IN THE UNITED STATES

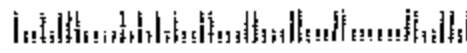
BUSINESS REPLY MAIL

FIRST CLASS PERMIT NO 73173 WASHINGTON, D.C.

POSTAGE WILL BE PAID BY NATL. HWY. TRAFFIC SAFETY ADMIN.

U.S. Department of Transportation National Highway Traffic Safety Administration DOT Auto Safety Hotline, NSA-10.1 400 7th Street, SW Washington, DC 20590

20530+0001



VEHICLE OWNER'S QUESTIONNAIRE

DOT AUTO SAFETY HOTLINE

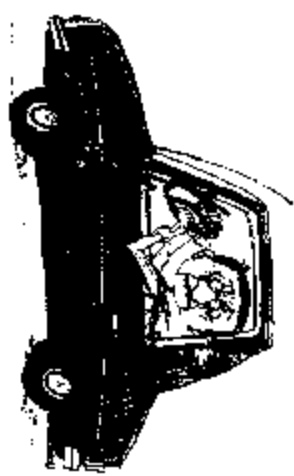
TO REPORT VEHICLE SAFETY DEFECTS COMPLETE THIS FORM OR

DASH2DOT

and dial toll free at

1-888-DASH-2-DOT 1-888-327-4236

DOT Auto Safety Hotline (DASH) 2 DOT



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