



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 1368

Date Received

19-JUN-2002

Od_or _____
rt_dt _____
pd_rt _____
ip_lr _____

Reference No.

8012140

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) (Location at bottom of windshield and driver's side door)		Vehicle Make	Vehicle Model	Vehicle Year	Current Odometer Reading
WDBDA242C1F088902		MERCEDES BENZ	190	1985	
Purchase Date	Dealer's Name _____		Engine Size (CID/CC/L _____)	☐ Turbo ☐ Diesel ☐ Gas ☐ Fuel Injection	
☐ New ☒ Used	City _____ State _____ Zip Code _____		No Cylinders _____		
Transmission Type	Antilock Brakes	Restraint System	Cruise Control	Drive Train	Vehicle Type
☐ Manual ☐ Automatic	☒ Yes ☐ No	☐ 3-Point Belt ☐ Driverside Airbag ☐ Passengerside Airbag	☐ Yes ☐ No	☐ Front ☐ Rear ☐ 4-Wheel	☐ Car ☐ Van ☐ Minivan ☐ Other _____
		☐ Motorbelt ☐ 2-Point Bel		☐ Sport Utl ☐ Truck ☐ Motorcycle	Body Style
					☐ 2-Door ☐ 4-Door ☐ Stationwagon ☐ Pick Up Truck ☐ Other _____

FAILED COMPONENT(S)/PART(S) INFORMATION

Component 06400000	Part Name(s) FUEL: THROTTLE LINKAGES AND CONTROL	Location ☐ Left ☐ Right ☐ Front ☐ Rear	Failed Part's ☐ Original ☐ Replacement
No of Failure	Dates of Failure(s) _____ 25-APR-2002	Failed Part(s) ☐ Yes ☐ No	NHTSA Previously ☐ Yes ☐ No
	Mileage at Failure(s) _____ 14500		
	Vehicle Speed at Failure(s) _____		

APPLICATION INCIDENT INFORMATION

(Please describe in detail the incident(s), Failure(s), Crash(es), and Injury(ies) on the back of this form)

Crash ☐ Yes ☒ No	Fire ☐ Yes ☐ No	Number of Persons Injured	Number of Fatalities	Estimated Property Damag	Reported to Police ☐ Yes ☐ No
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NARRATIVE DESCRIPTION OF FAILURE(S), INCIDENT(S), INJURY(IES)

AT 45MPH WHILE TURNING VEHICLE SURGED WITH NO WARNING. CAUSE UNKNOWN. DEALER WILL BE CONTACTED.*AK

COPIES OF REPORTS ARE KEPT

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.

 DOT Auto Safety Hotline Vehicle Owner's Questionnaire (VOQ) U.S. Department of Transportation National Highway Traffic Safety Administration NATIONWIDE 1-888-DASH-2-DOT 1-888-327-4236 www.nhtsa.dot.gov/hotline		FOR AGENCY USE ONLY 1368 Date Received <u>19 JUN 2002</u> RECEIVED OFFICE DEFECTS INVESTIGATION Date <u>7/18/02</u> Reference No. <u>8012140</u> Work Number <u>[REDACTED]</u> Home Number <u>[REDACTED]</u>	
OWNER INFORMATION (Type or Print)			
[REDACTED]		759877	
TARZANA		CA [REDACTED]	
Do you authorize NHTSA to provide a copy of record to the manufacturer of your vehicle? ☒ YES ☐ NO In the absence of an <u>[REDACTED]</u> and address to the vehicle manufacturer. Signature of Owner <u>[REDACTED]</u> Date <u>7/18/02</u>			
VEHICLE INFORMATION			
Vehicle Ident. No. (VIN.) (Located at bottom of windshield on driver's side) WDBDA242C1F088902	Vehicle Make MERCEDES BENZ	Vehicle Model 190	Vehicle Year 1985
Purchase Date 1989		Current Odometer Reading 145,335	
Dealer's Name <u>PRIVATE PARTY - NIEPHS</u> City <u>L.A.</u> State <u>CA</u> Zip Code <u>[REDACTED]</u>		Engine Siz (CID/CC/L) No Cylinders <u>4</u>	
☐ New ☒ Used Transmission Type ☐ Manual ☒ Automatic		☐ Turbo Diesel Gas Fuel Injection Body Style ☐ 2-Door ☒ 4-Door ☐ Stationwagon ☐ Pick Up ☐ Truck	
Antilock Brakes ☒ Yes ☐ No Restraint System ☒ 3-Point Belt ☐ Motorbelt ☐ Driverside Airbag ☐ 2-Point Belt ☐ Passengerside Airbag		Cruise Control ☒ Yes ☐ No Drive Trail ☐ Front ☐ Rear ☐ 4-Wheel	
FAILED COMPONENT(S)/PART(S) INFORMATION			
Component 06400000	Part Name(s) FUEL THROTTLE LINKAGES AND CONTROL	Location ☐ Left ☐ Right ☐ Front ☐ Rear	Failed Part(s) ☐ Original ☐ Replacement
No of Failures MANY	Date(s) of Failure(s) <u>23 APR 2002</u> Mileage at Failure(s) <u>41500</u> Vehicle Speed at Failure(s) _____	Failed Part(s) ☐ Yes ☐ No	NHTSA Previously ☐ Yes ☐ 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 ☒ Yes ☒ No	Fire ☐ Yes ☐ No	Number of Persons Injured 0	Number of Fatalities 0
Estimated Property Damage 4,759.77		Reported to Police ☐ Yes ☒ No	
NARRATIVE DESCRIPTION OF FAILURE(S), INCIDENT(S), INJURY(IES)			
AT 45MPH WHILE TURNING VEHICLE SURGED WITH NO WARNING. CAUSE UNKNOWN. DEALER WILL BE CONTACTED. *AK The attached correspondence will provide the most accurate information. If any further info is required I will be happy to respond. Vehicle surged into a brick wall. It was in parking area. When went to put into drive with			
CONTINUE ON BACK IF NEEDED			
The Privacy Act of '94-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.			

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

Foot on the Brake pedal the car lurched forward.
The surge would also occur while driving but
when I'd put gear into neutral it would go back into
the normal drive. This occurred sporadically.

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

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

NO POSTAGE
NECESSARY
IF MAILED
IN THE
UNITED STATES

**VEHICLE
OWNER'S
QUESTIONNAIRE**

DOT AUTO SAFETY HOTLINE

TO REPORT VEHICLE SAFETY DEFECTS
COMPLETE THIS FORM

OR

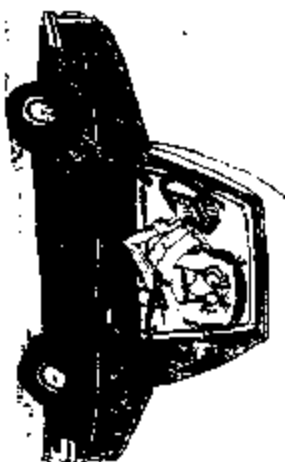
DASH2DOT

and dial toll free at

1-888-DASH-2-DOT

1-888-327-4236

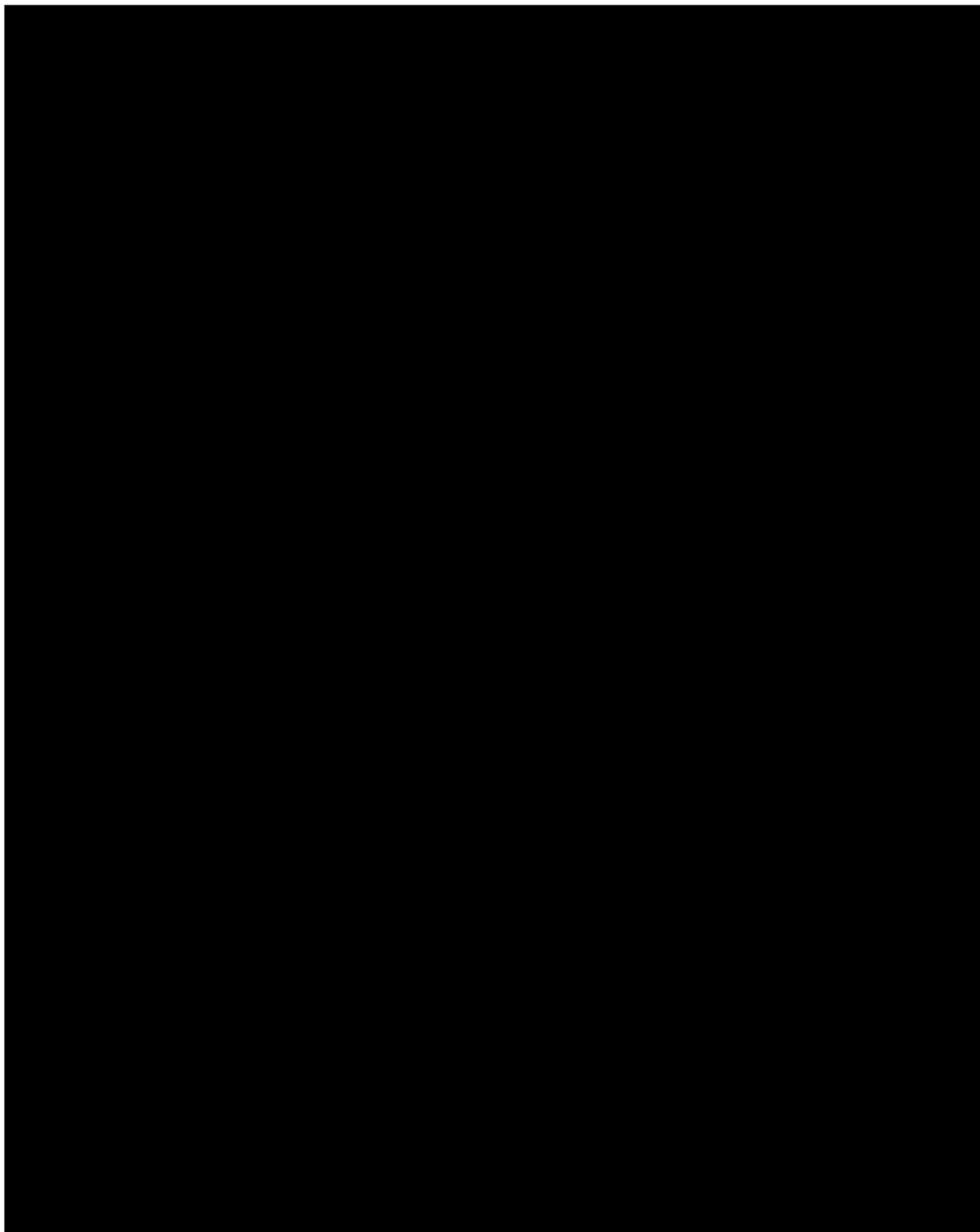
DOT Auto Safety Hotline
(DASH) 2 DOT



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**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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