

U.S. Department
of TransportationNational Highway
Traffic Safety
Administration

DOT Auto Safety Hotline

Vehicle Owner's Questionnaire (VOQ)

NATIONWIDE 1-888-DASH-2-DOT

1-888-327-4236

www.nhtsa.dot.gov/hotline

FOR AGENCY USE ONLY

436

Date Received

04-MAY-2000

Od_or _____
rt_dt _____
od_rt _____
up_ltr _____

Reference No.

861432

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>(located at bottom of windshield or driver's side)</small>	Vehicle Make	Vehicle Model	Vehicle Year	Current Odometer Reading
2MELM74W6VX674881	MERCURY	GRAND MARQUI	1997	

Purchase Date	Dealer's Name _____	Engine Size (CID/CCL) _____	<input type="checkbox"/> Turbo <input type="checkbox"/> Diesel <input type="checkbox"/> Gas <input type="checkbox"/> Fuel Injection
<input type="checkbox"/> New <input checked="" type="checkbox"/> Used	City _____ State _____ Zip Code _____	No. Cylinders _____	

Transmission Type <input type="checkbox"/> Manual <input type="checkbox"/> Automatic	Antilock Brakes <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Restraint System <input type="checkbox"/> 3-Point Belt <input type="checkbox"/> Driver Side Airbag <input type="checkbox"/> Passenger Side Airbag <input type="checkbox"/> Inflator <input type="checkbox"/> 2-Point Belt	Cruise Control <input type="checkbox"/> Yes <input checked="" 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"/> Van <input type="checkbox"/> Minivan <input type="checkbox"/> Other <input type="checkbox"/> Sport Utl <input type="checkbox"/> Truck <input type="checkbox"/> Motorcycle	Body Style <input type="checkbox"/> 2-Door <input type="checkbox"/> 4-Door <input type="checkbox"/> Station Wagon <input type="checkbox"/> Pick Up Truck <input type="checkbox"/> Other
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FAILED COMPONENT(S)/PART(S) INFORMATION

Component 03273000	Part Name(s) BRAKES:HYDRAULIC:DISC:ROTOR:DISC HUB	Location <input type="checkbox"/> Left <input type="checkbox"/> Front <input type="checkbox"/> Right <input type="checkbox"/> Rear	Failed Part(s) <input type="checkbox"/> Original <input type="checkbox"/> Replacement
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No. of Failures	Date(s) of Failure(s) 01-APR-2000	Failed Part(s) Available?	NHTSA Previously Contacted?
	Mileage at Failure(s) 13	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
	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 <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Fire <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Number of Persons Injured	Number of Fatalities	Estimated Property Damage	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)

CONSUMER'S BRAKE ROTORS ARE WARPED. WARRANTY EXPIRED, CONSUMER WILL HAVE TO COVER THE COST. *AK

CONTINUE ON BACK IF NEEDED

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		OFFICE USE ONLY 436	
 U.S. Department of Transportation National Highway Traffic Safety Administration		Vehicle Owner's Questionnaire (VOQ) NATIONWIDE 1-888-DASH-2-DOT 1-888-327-4236 www.nhtsa.dot.gov/hotline	
OWNER INFORMATION (Type or Print) [Redacted]		Date Received 01 MAY 19 AM 7:51 04 MAY 2000 OFFICE DEFECTS INVESTIGATION	
Do you authorize NHTSA to provide a copy of report to the manufacturer of your vehicle? in the absence of an authorized NHTSA representative? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO		Reference No. 861432 Work Number _____ Home Number _____	
Signature of Owner _____ Date 5/12/2000		Vehicle Manufacturer _____	
VEHICLE INFORMATION			
Vehicle Ident. No. (VIN) (Located at bottom of windshield on driver's side)	Vehicle Make	Vehicle Model	Vehicle Year
2MELM74W6VX674801	MERCURY	GRAND MARQUI	1997
Current Odometer Reading			
15,600			
Purchase Date	Dealer's Name	Engine Size (CID/GCC/L)	<input type="checkbox"/> Turbo
4-18-1997	VAN DAHM LINE - MERE	4.8	<input type="checkbox"/> Diesel
<input checked="" type="checkbox"/> New <input type="checkbox"/> Used	NOW - HAWKINSON LINE - MERE	No Cylinders 8	<input checked="" type="checkbox"/> Gas
NEW	City DAK LAWN State IL Zip Code 60453		<input type="checkbox"/> Fuel Injection
Transmission Type	Antilock Brakes	Restraint System	Cruise Control
<input type="checkbox"/> Manual	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> 3-Point Belt	<input checked="" type="checkbox"/> YES
<input checked="" type="checkbox"/> Automatic	<input checked="" type="checkbox"/> No	<input type="checkbox"/> Motorbelt	<input checked="" type="checkbox"/> Yes
		<input checked="" type="checkbox"/> Driverside Airbag	<input type="checkbox"/> No
		<input type="checkbox"/> 2-Point Belt	
		<input checked="" type="checkbox"/> Passengerside Airbag	
			Drive Train
			<input type="checkbox"/> Front
			<input checked="" type="checkbox"/> Rear
			<input type="checkbox"/> 4-Wheel
			Vehicle Type
			<input checked="" type="checkbox"/> Car
			<input type="checkbox"/> Sport Ut
			<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 checked="" 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	Part Name(s)	Location	Failed Part(s)
03273000	BRAKES:HYDRAULIC:DISC:ROTOR:DISC HUB	<input checked="" type="checkbox"/> Left	<input checked="" type="checkbox"/> Original
		<input checked="" type="checkbox"/> Front	<input type="checkbox"/> Replacement
		<input type="checkbox"/> Right	
		<input type="checkbox"/> Rear	
No of Failures	Date(s) of Failure(s)	Failed Part(s) Available?	NHTSA Previously Contacted?
	01-APR-2000	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
	Mileage at Failure(s) 15		
	Vehicle Speed at Failure(s) ALL SPEEDS		
APPLICATION INCIDENT INFORMATION			
(Please describe in detail the incident(s), Failure(s), Crash(es), and injury(ies) on the back of this form)			
Crash	Fire	Number of Persons Injured	Number of Fatalities
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	0	0
		Estimated Property Damage	Reported to Police
		0	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
NARRATIVE DESCRIPTION OF FAILURE(S), INCIDENT(S), INJURY(IES)			
CONSUMER'S BRAKE ROTORS ARE WARPED. WARRANTY EXPIRED, CONSUMER WILL HAVE TO COVER THE COST. *AK "SEE BACK PAGE" I've Had Cars Over 45 Years and Never Had Brake Drums or Rotors Warp and Cut grooves like this Car has done. Metal must not be hardened, like older cars where the Pads can cut into the rotors like is happening in this modern age "INFERIOR STEEL" "JUNK"			
			CONTINUE ON BACK IF NEEDED
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.			

