

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

137

Date Received

26-JUL-2000

Od_or

rt_dt

od_rt

up_ltr

Reference No.

866076

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) (located at front of windshield or driver's side)	Vehicle Make	Vehicle Model	Vehicle Year	Current Odometer Reading
2MECM75FHLX666552	MERCURY	MARQUIS	1990	

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	Body Style
☐ Manual ☐ Automatic	☐ Yes ☒ No	☐ 3-Point Belt ☐ Driverside Airbag ☐ Passengerside Airbag ☐ Motorbelt ☒ 2-Point Belt	☐ Yes ☒ No	☐ Front ☐ Rear ☐ 4-Wheel	☐ Car ☐ Van ☐ Minivan ☐ Other	☐ Sport Vlt ☐ Truck ☐ Motorcycle ☐ 2-Door ☐ 4-Door ☐ Stationwagon ☐ Pick Up Truck ☐ Other

FAILED COMPONENT(S)/PART(S) INFORMATION

Component 00000000	Part Name(s) ELECTRICAL SYSTEM	Location ☐ Left ☐ Front ☐ Right ☐ Rear	Failed Part(s) ☐ Original ☐ Replacement
No. of Failures 0	Dates of Failure(s) 20-JUL-2000 Mileage at Failure(s) 112000 Vehicle Speed at Failure(s) 0	Failed Part(s) Available? Yes No	NHTSA Previously Contacted? 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	Fire	Number of Persons Injured	Number of Fatalities	Estimated Property Damage	Reported to Police
☐ Yes ☒ No	☐ Yes ☒ No	0	0		☐ Yes ☒ No

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

WHILE DRIVING COULD SEE SMOKE COMING FROM THE TRUNK AND THE VEHICLE WILL SHUT OFF IN THE MIDDLE OF THE ROAD. AFTER CHECKING WITH TECHNICIAN IT WAS ESTABLISHED THAT IT WAS AN ELECTRICAL SYSTEM PROBLEM. *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.

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**

137

Date Received

26-JUL-2000

Od_or

rt_dt

od_rt

up_ltr

Reference No.

866076

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.) (located between front fender or driver's side)	Vehicle Make	Vehicle Model	Vehicle Year	Current Odometer Reading
2MECM75FHLX666552	MERCURY	MARQUIS	1990	

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 ☐ Manual ☐ Automatic	Antilock Brakes ☐ Yes ☒ No	Restraint System ☐ 3-Point Belt ☐ Driverside Airbag ☐ Passengerside Airbag ☐ Motorbelt ☒ 2-Point Belt	Cruise Control ☐ Yes ☒ No	Drive Train ☐ Front ☐ Rear ☐ 4-Wheel	Vehicle Type ☐ Car ☐ Van ☐ Minivan ☐ Other	Body Style ☐ Sport Vlt ☐ Truck ☐ Motorcycle ☐ 2-Door ☐ 4-Door ☐ Stationwagon ☐ Pick Up Truck ☐ Other
--	---	--	--	--	--	--

FAILED COMPONENT(S)/PART(S) INFORMATION

Component 08000000	Part Name(s) ELECTRICAL SYSTEM	Location ☐ Left ☐ Front ☐ Right ☐ Rear	Failed Part(s) ☐ Original ☐ Replacement
No. of Failures 0	Dates of Failure(s) 20-JUL-2000 Mileage at Failure(s) 112000 Vehicle Speed at Failure(s) 0	Failed Part(s) Available? Yes No	NHTSA Previously Contacted? 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	Reported to Police ☐ Yes ☒ No
--	---	--------------------------------	---------------------------	---------------------------	---

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

WHILE DRIVING COULD SEE SMOKE COMING FROM THE TRUNK AND THE VEHICLE WILL SHUT OFF IN THE MIDDLE OF THE ROAD. AFTER CHECKING WITH TECHNICIAN IT WAS ESTABLISHED THAT IT WAS AN ELECTRICAL SYSTEM PROBLEM. *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.

 U.S. Department of Transportation National 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 197 Date Received <u>26-JUL-2000</u> Office of Defects Investigation	
OWNER INFORMATION (Type or Print) [Redacted]				Reference No. 866076	
Do you authorize NHTSA to provide a copy of report to the manufacturer of your vehicle? In the absence of an address to the vehicle manufacturer. Signature of Owner <u>[Redacted]</u> ☒ YES ☐ NO Date <u>8/14/2000</u>				Work Number _____ Home Number _____	
VEHICLE INFORMATION					
Vehicle Ident. No. (VIN) (Located at bottom of windshield on driver's side) 2MECM75FHLX666552		Vehicle Make MERCURY		Vehicle Model MARQUIS	
Vehicle Year 1990		Current Odometer Reading			
Purchase Date <u>APRIL 93</u> ☐ New ☒ Used		Dealer's Name _____ City _____ State _____ Zip Code _____		Engine Size (CID/CC/L) <u>5.0L</u> No Cylinders <u>8</u> ☐ Turbo ☐ Diesel ☒ Gas ☒ Fuel Injection	
Transmission Type ☐ Manual ☒ Automatic		Antilock Brakes ☐ Yes ☒ No		Restraint System ☐ 3-Point Belt ☐ Motorbelt ☒ Driverside Airbag ☒ 2-Point Belt ☐ Passengerside Airbag	
Cruise Control ☒ Yes ☒ No		Drive Train ☐ Front ☒ Rear ☐ 4-Wheel		Vehicle Type ☒ Car ☐ Sport Utl ☐ 2-Door ☐ Van ☐ Truck ☒ 4-Door ☐ Minivan ☐ Motorcycle ☐ Stationwagon ☐ Other ☐ Pick Up Truck ☐ Other	
FAILED COMPONENT(S)/PART(S) INFORMATION					
Component 08009000		Part Name(s) ELECTRICAL SYSTEM		Location ☐ Left ☐ Right ☒ Front ☒ Rear	
Failed Part(s) ☒ Original ☐ Replacement		No of Failures 0			
Date(s) of Failure(s) <u>20-JUL-2000</u> Mileage at Failure(s) <u>112000</u> Vehicle Speed at Failure(s) <u>0</u> STALLED		Failed Part(s) Available? ☒ Yes ☐ No		NHTSA Previously Contacted? ☒ 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 71000.00		Reported to Police ☐ Yes ☒ No	
NARRATIVE DESCRIPTION OF FAILURE(S), INCIDENT(S), INJURY(IES)					
WHILE DRIVING COULD SEE SMOKE COMING FROM THE TRUNK AND THE VEHICLE WILL SHUT OFF IN THE MIDDLE OF THE ROAD. AFTER CHECKING WITH TECHNICIAN IT WAS ESTABLISHED THAT IT WAS AN ELECTRICAL SYSTEM PROBLEM. *AK WIRING / CABBING IN TRUNK TO GAS SHUT OFF SWITCH & WIRING INTO BULKHEAD TO FUEL PUMP BURST AND FLAMES AND BURNED. WE QUICKLY DISCONNECTED BATTERY AND SHUT OF SOURCE OF POWER TO WIRING. FUSING LINKS DID NOT OPERATE AND NO FLAMES WERE BURNING.					
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.					

Fold to show Return Address (no stamp needed) 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 on the side opposite the whitewall or on either side of a blackwall tire.

NARRATIVE DESCRIPTION (CONTINUED)

A FULL INVESTIGATION OF THIS SHOULD BE IMPLEMENTED.

NOT AWARE OF THIS FAILURE MODE. MOVES AND BE LAST.
APPROXIMATELY 10000 MILES. IF THE DRIVER AND PASSENGERS ARE
LEFT THERE, BATTERY WILL DISCONNECT IN TIME. THIS IS
WAS TOLD I DID NOT GIVE IT ENOUGH TIME TO IGNITE
MAYBE THE CAR DID NOT BLINK UP BECAUSE THE TANK
IN 1988. 91 VENTURES, ROAD CARDS WITH A MESSAGE
45000 TO 60000 OF THIS TYPE OF CABLED PROBLEMS
IS IN SERVICE APPROXIMATELY 10 YEAR TANKS ARE
LATEST FAILURE MODE SHOWN UP AFTER VEHICLE
HOT (12V) & COOL (12V) STARTING TO CATCH. THIS
TO FAILURE. AFTER MAINTENANCE OF WIRE & BATTERY
THE FEEL THROUGH RUBBER BUSHING. THE WHOLE
WENT INTO BACKHEAD TO FUEL PUMP WAS SHUT OFF AT
AFTER INVESTIGATING SOME OF PROBLEMS, WOULD THAT

CURTAINED.

☆ U.S.G.P.O.: 1992-625-937/6296

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
Information Management Staff NSA-10.01
400 7th Street, SW
Washington, DC 20590

NO POSTAGE
NECESSARY
IF MAILED
IN THE
UNITED STATES

