Form Approved: O.M.B. No. 2127-0038

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 117	
Date Received: 31-JUL-2000	Od_or ____ ____ rt_dt ____ ____ od_rt ____ ____ up_ltr ____ ____
	Reference No. 866321

[redacted]

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 bottom of windshield on driver's side)	Vehicle Make	Vehicle Model	Vehicle Year	Current Odometer Reading
1MEFM55U7WG603050	MERCURY	SABLE	1998	

Purchase Date: ☐ New ☒ Used

Dealer's Name _____
City _____ State _____ Zip Code _____

Engine Size (CID/CC/L) _____
No Cylinders _____
☐ Turbo ☐ Diesel ☐ Gas ☐ Fuel Injection

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 Utl ☐ Truck ☐ Motorcycle	☐ 2-Door ☐ 4-Door ☒ Stationwagon ☐ Pick Up Truck ☐ Other _____

FAILED COMPONENT(S)/PART(S) INFORMATION

Component	Par. Name(s)	Location	Failed Part(s)
10141000	VISUAL SYSTEMS:GLASS:POWER WINDOW TAILGATE AND BACK	☐ Left ☐ Right ☐ Front ☐ Rear	☐ Original ☐ Replacement

No of Failures	Date(s) of Failure(s) / Mileage at Failure(s) / Vehicle Speed at Failure(s)	Failed Part(s) Available?	NHTSA Previously Contacted?
1	29-JUL-2000 41 5	☐ Yes ☐ No	☐ 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)

VEHICLE HAD BEEN PARKED IN GARAGE. WIFE STARTED BACKING VEHICLE OUT WHEN REAR WINDOW SHATTERED OR EXPLODED WITHOUT WARNING. *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 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.

Form Approved: O.M.B. No. 2127-0008

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

RECEIVED
00 OCT -2 AM 11:12
OFFICE OF DEFECTS INVESTIGATION

FOR AGENCY USE ONLY 117

Date Received: 31-JUL-2000

Od_or
rt_dt
od_rt
up_ltr

Reference No. 866321

OWNER INFORMATION (Type or Print)

[redacted] 623783

Work Numbe [redacted]
Home Numbe [redacted]

Do you authorize NHTSA to provide a copy of report to the manufacturer of your vehicle? ☒ YES ☐ NO
In the absence of [redacted] name and address to the vehicle manufacturer.

Signature of Own [redacted] Date 7/20/2000

VEHICLE INFORMATION

Vehicle Ident No. (VIN.) (Located at bottom of windshield on driver's side)	Vehicle Make	Vehicle Model	Vehicle Year	Current Odometer Reading
1MEFM55U7WG603050	MERCURY	SABLE	1998	41,386

Purchase Date: DEC. 1998 ☐ New ☒ Used

Dealer's Name: FORD LEASING
City: PISCATAWAY State: NJ Zip Code: 08854

Engine Size (CID/CC/L): 3.0L
No Cylinders: 6
☐ Turbo ☐ Diesel ☒ Gas ☐ Fuel Injection

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

FAILED COMPONENT(S)/PART(S) INFORMATION

Component	Part Name(s)	Location	Failed Part(s)
10141000	VISUAL SYSTEMS:GLASS:POWER WINDOW TAILGATE AND BACK	☐ Left ☐ Right ☐ Front ☒ Rear	☒ Original ☐ Replacement

No of Failures	Date(s) of Failure(s) / Mileage at Failure(s) / Vehicle Speed at Failure(s)	Failed Part(s) Available?	NHTSA Previously Contacted?
1	29-JUL-2000 / 41,000 / 0 - CAR STILL IN PARK	☐ Yes ☒ No	☐ 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)

VEHICLE HAD BEEN PARKED IN GARAGE. WIFE STARTED CAR IN ORDER TO BACK [redacted] VEHICLE OUT WHEN REAR WINDOW SHATTERED OR EXPLODED WITHOUT WARNING. *AK

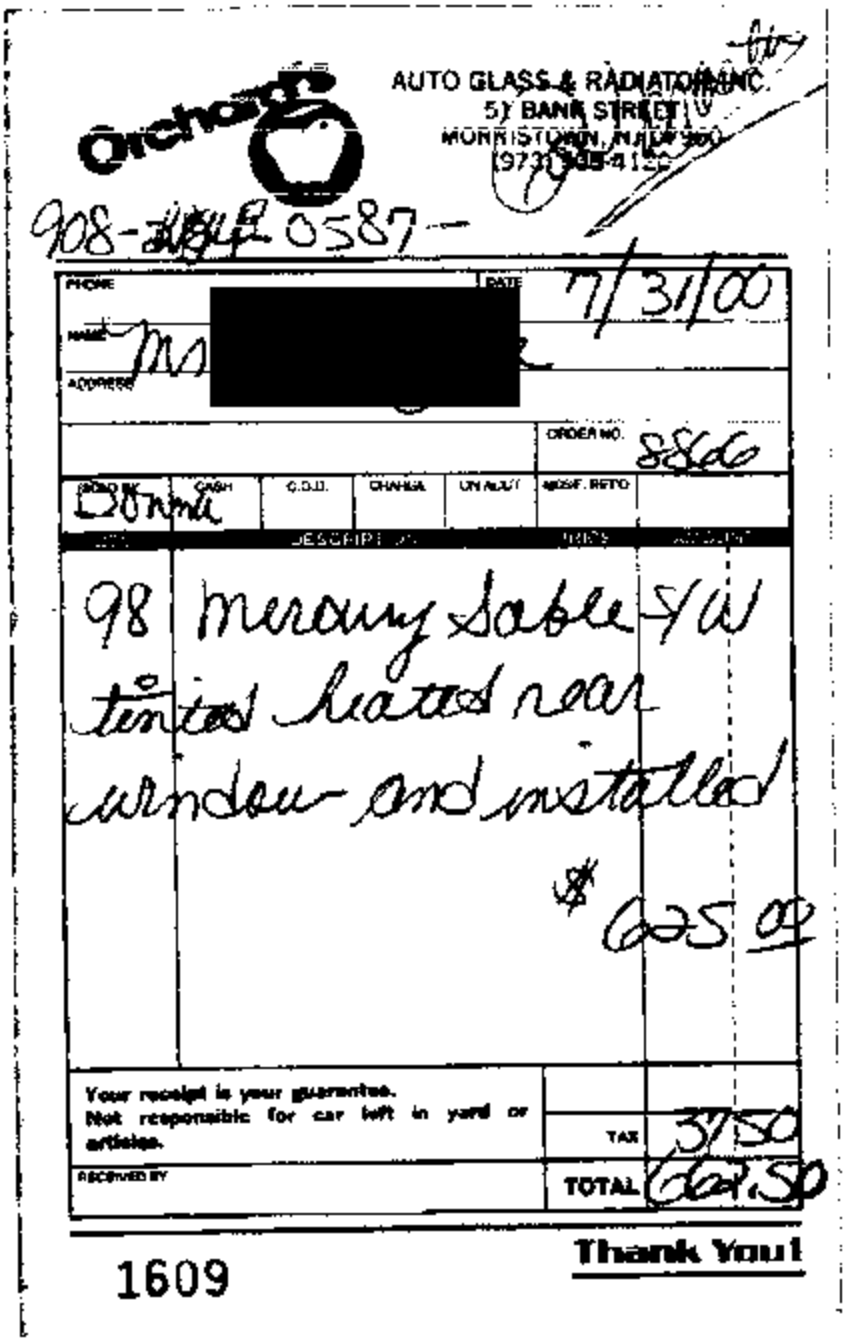
CAR WAS STILL IN PARK!
DJG

GLASS EXPLODED OUTWARD, COATING ENTIRE REAR HALF OF VEHICLE INTERIOR, NO INJURIES. DJG

CONTINUE ON BACK IF NEEDED

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1998 MERCURY SABLE WAGON



AUTO GLASS & RADIATOR INC.
51 BANK STREET
MORRISTOWN, N.J. 07960
(973) 285-4155

908-[redacted]0587

PHONE
DATE 7/31/00
NAME Ms. [redacted]
ADDRESS
ORDER NO. 8866

SOLD BY	CASH	C.O.D.	CHARGE	ON ACCT.	MDSE. RETD	
Donna						

QTY.	DESCRIPTION	PRICE	AMOUNT
98	mercury Sable S/W tinted heated rear window and installed	$625.00	

Your receipt is your guarantee.
Not responsible for car left in yard or articles.

TAX 37.50

RECEIVED BY

TOTAL 662.50

1609

Thank You!