

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 118

Date Received

29-SEP-2000

 Od\_or \_\_\_\_\_  
 rt\_dt \_\_\_\_\_  
 od\_rt \_\_\_\_\_  
 up\_ltr \_\_\_\_\_

Reference No.

871862

 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>(Listed at front of windshield or driver's side)</small>	Vehicle Make	Vehicle Model	Vehicle Year	Current Odometer Reading
	FIRESTONE	FIRESTONE	1997	

Purchase Date	Dealer's Name _____	Engine Size (CID/CC/L) _____	<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	Antilock Brakes	Restraint System	Cruise Control	Drive Train	Vehicle Type	Body Style
<input type="checkbox"/> Manual <input type="checkbox"/> Automatic	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> 3-Point Belt <input type="checkbox"/> Driverside Airbag <input type="checkbox"/> Passengerside Airbag <input type="checkbox"/> Motorbell <input type="checkbox"/> 2-Point Belt	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Front <input type="checkbox"/> Rear <input type="checkbox"/> 4-Wheel	<input type="checkbox"/> Car <input type="checkbox"/> Van <input type="checkbox"/> Minivan <input type="checkbox"/> Other _____ <input type="checkbox"/> Sport Ult <input type="checkbox"/> Truck <input type="checkbox"/> Motorcycle	<input type="checkbox"/> 2-Door <input type="checkbox"/> 4-Door <input type="checkbox"/> Stationwagon <input type="checkbox"/> Pick Up Truck <input checked="" type="checkbox"/> Other _____

## FAILED COMPONENT(S)/PART(S) INFORMATION

Component 02740000	Part Name(s) TIRES:TREAD	Location	Failed Part(s)
		<input type="checkbox"/> Left <input type="checkbox"/> Right <input type="checkbox"/> Front <input type="checkbox"/> Rear	<input type="checkbox"/> Original <input type="checkbox"/> Replacement

No. of Failures	Date(s) of Failure(s) 27-AUG-2000	Failed Part(s) Available?	NHTSA Previously Contacted?
	Mileage at Failure(s) _____ Vehicle Speed at Failure(s) _____	<input type="checkbox"/> Yes <input type="checkbox"/> No	<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	Fire	Number of Persons Injured	Number of Fatalities	Estimated Property Damage	Reported to Police
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No				<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

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

PE00020; TIRE TREAD SEPARATION: WHILE DRIVING ABOUT 75 MPH, TREAD ON THE REAR PASSENGER'S SIDE TIRE CAME OFF. DRIVER WAS ABLE TO SLOW DOWN AND GET OFF THE INTERSTATE. TIRE SIZE P21570R15. REPLACEMENT TIRE EQUIPMENT ON A 94, LINCOLN TOWN CAR. TIRE MILEAGE ABOUT 44,000. FIRESTONE WAS CONTACTED ABOUT THE PROBLEM. CONSUMER WAS SENT AN INCIDENT REPORT. PLEASE PROVIDE ANY FURTHER INFORMATION. AK

CONTINUED ON BACK (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.

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Reference No.

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	FIRESTONE	FIRESTONE	1997	

Purchase Date	Dealer's Name _____	Engine Size (CID/CC/L) _____	<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	Antilock Brakes	Restraint System	Cruise Control	Drive Train	Vehicle Type	Body Style
<input type="checkbox"/> Manual <input type="checkbox"/> Automatic	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> 3-Point Belt <input type="checkbox"/> Driverside Airbag <input type="checkbox"/> Passengerside Airbag <input type="checkbox"/> Motorbell <input type="checkbox"/> 2-Point Belt	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Front <input type="checkbox"/> Rear <input type="checkbox"/> 4-Wheel	<input type="checkbox"/> Car <input type="checkbox"/> Van <input type="checkbox"/> Minivan <input type="checkbox"/> Other _____ <input type="checkbox"/> Sport Ult <input type="checkbox"/> Truck <input type="checkbox"/> Motorcycle	<input type="checkbox"/> 2-Door <input type="checkbox"/> 4-Door <input type="checkbox"/> Stationwagon <input type="checkbox"/> Pick Up Truck <input checked="" type="checkbox"/> Other _____

**FAILED COMPONENT(S)/PART(S) INFORMATION**

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		<input type="checkbox"/> Left <input type="checkbox"/> Right <input type="checkbox"/> Front <input type="checkbox"/> Rear	<input type="checkbox"/> Original <input type="checkbox"/> Replacement

No. of Failures	Date(s) of Failure(s) 27-AUG-2000 Mileage at Failure(s) _____ Vehicle Speed at Failure(s) _____	Failed Part(s) Available? <input type="checkbox"/> Yes <input type="checkbox"/> No	NHTSA Previously Contacted? <input type="checkbox"/> Yes <input type="checkbox"/> No
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**APPLICATION INCIDENT INFORMATION**

(Please describe in detail the incident(s), failure(s), crash(es), and injury(ies) on the back of this form.)

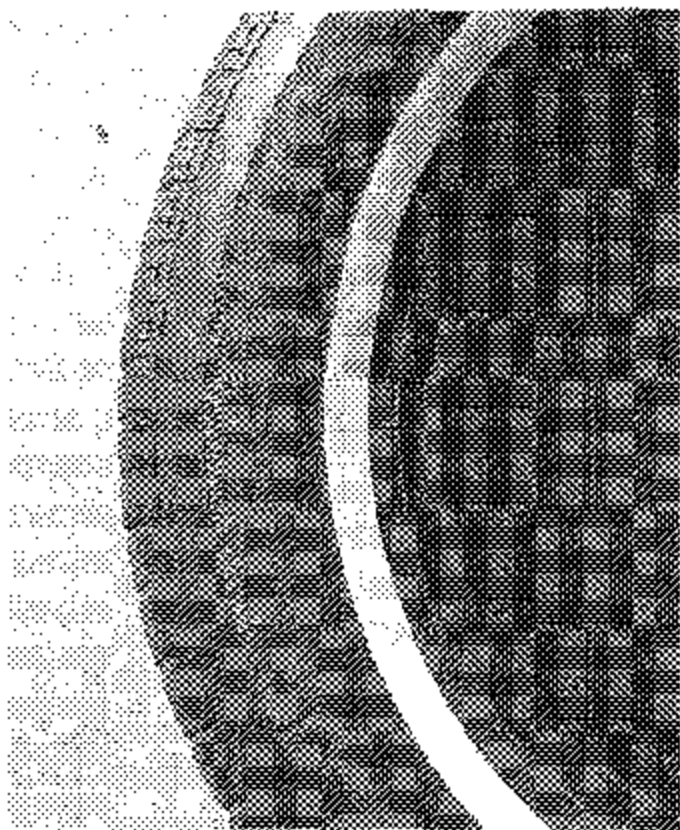
Crash	Fire	Number of Persons Injured	Number of Fatalities	Estimated Property Damage	Reported to Police
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No				<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

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

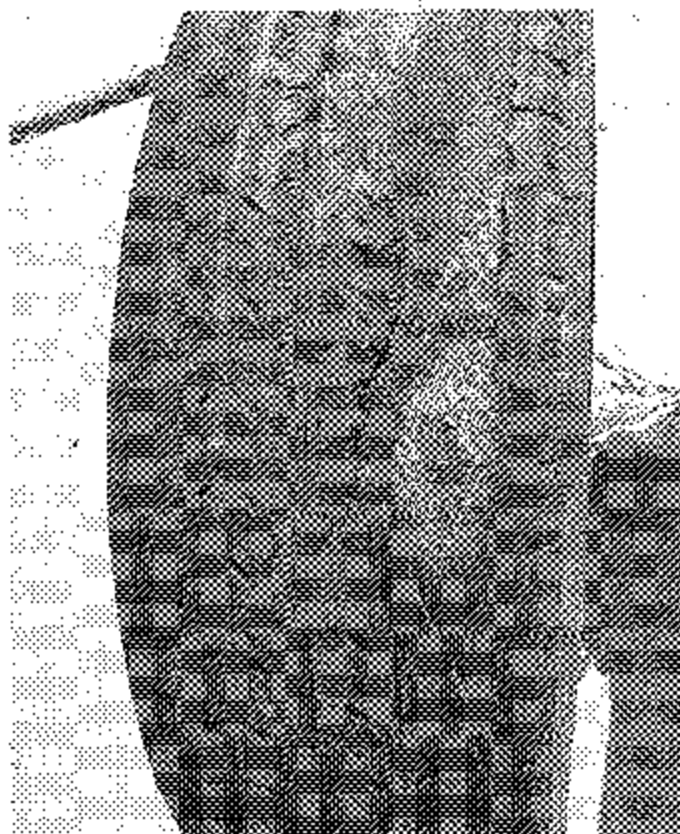
PE00020; TIRE TREAD SEPARATION: WHILE DRIVING ABOUT 75 MPH, TREAD ON THE REAR PASSENGER'S SIDE TIRE CAME OFF. DRIVER WAS ABLE TO SLOW DOWN AND GET OFF THE INTERSTATE. TIRE SIZE P21570R15. REPLACEMENT TIRE EQUIPMENT ON A 94, LINCOLN TOWN CAR. TIRE MILEAGE ABOUT 44,000. FIRESTONE WAS CONTACTED ABOUT THE PROBLEM. CONSUMER WAS SENT AN INCIDENT REPORT. PLEASE PROVIDE ANY FURTHER INFORMATION. AK

CONTINUED ON BACK PLEASE

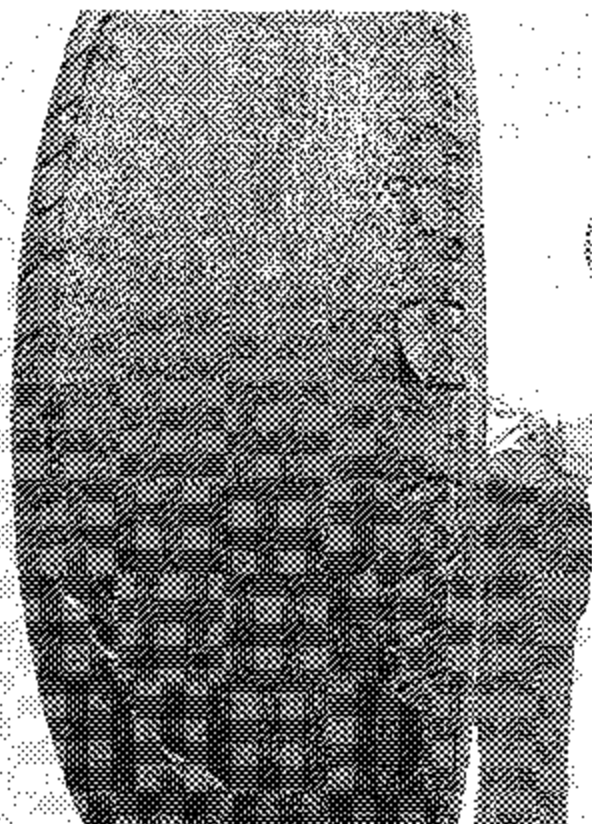
The Privacy Act of 1974-Public Law 93-579 This information is requested pursuant to authority vested in the National Highway Traffic Safety Act and subsequent amendments. You are under no obligation to respond to this questionnaire. Your response may be used to assist the NHTSA in determining whether 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.



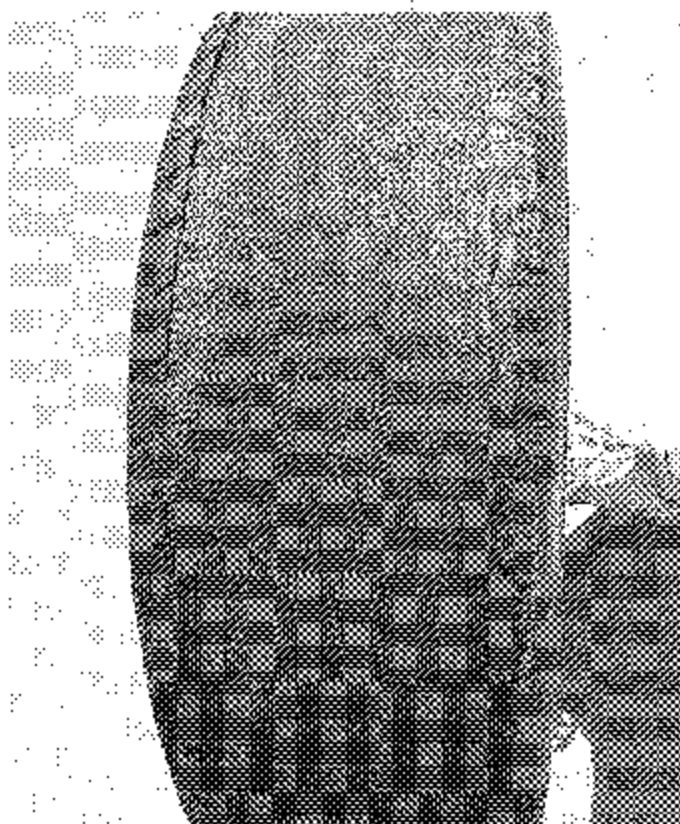
1. B. Meer, Firestone FT70, failed 27 Aug 2000



2. B. Meer, Firestone FT70, failed 27 Aug 2000



3. B. Meer, Firestone FT70, failed 27 Aug 2000



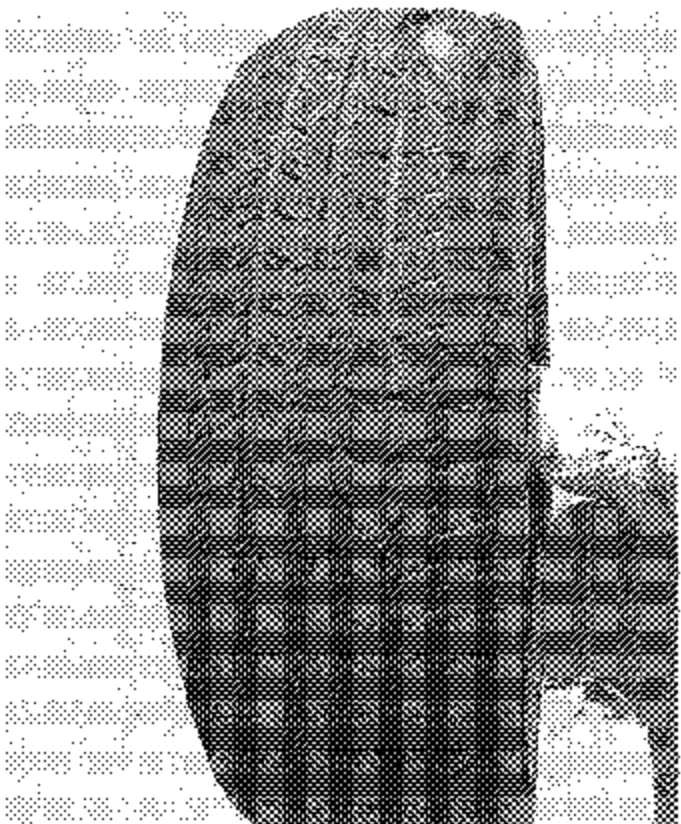
4. B. Meer, Firestone FT70, failed 27 Aug 2000



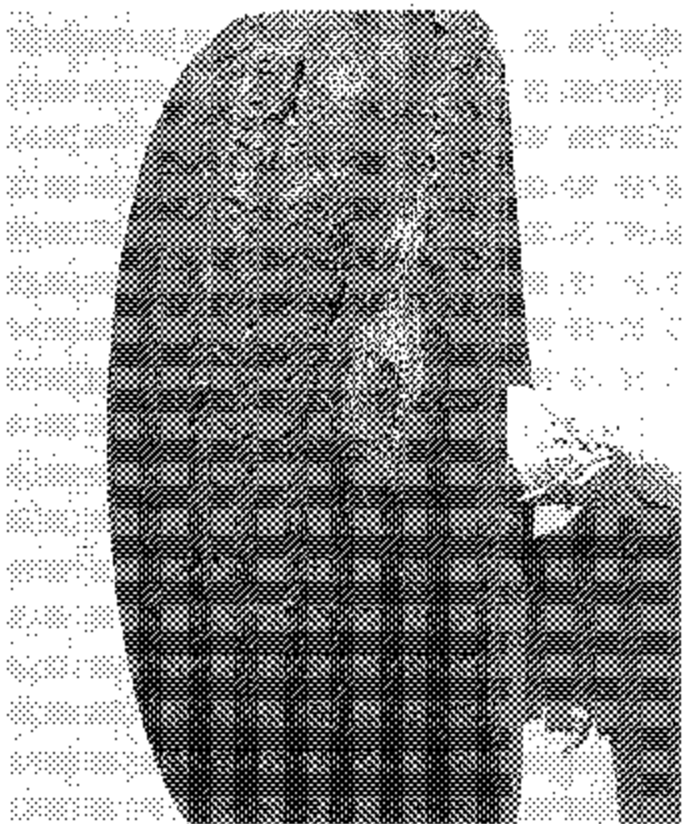
5. D. Meer, Firestone FT70, failed 27 Aug 2000



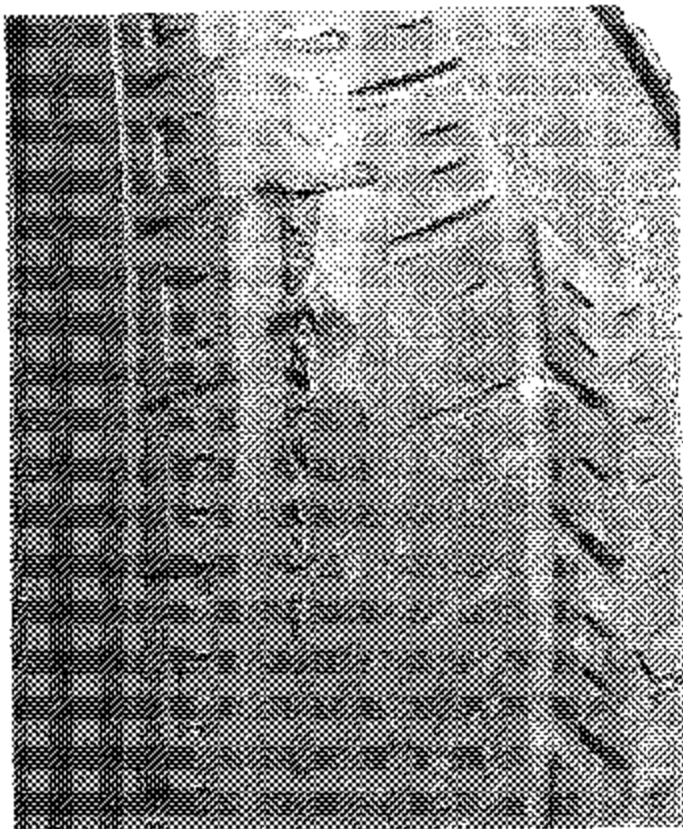
6. D. Meer, Firestone FT70, failed 27 Aug 2000



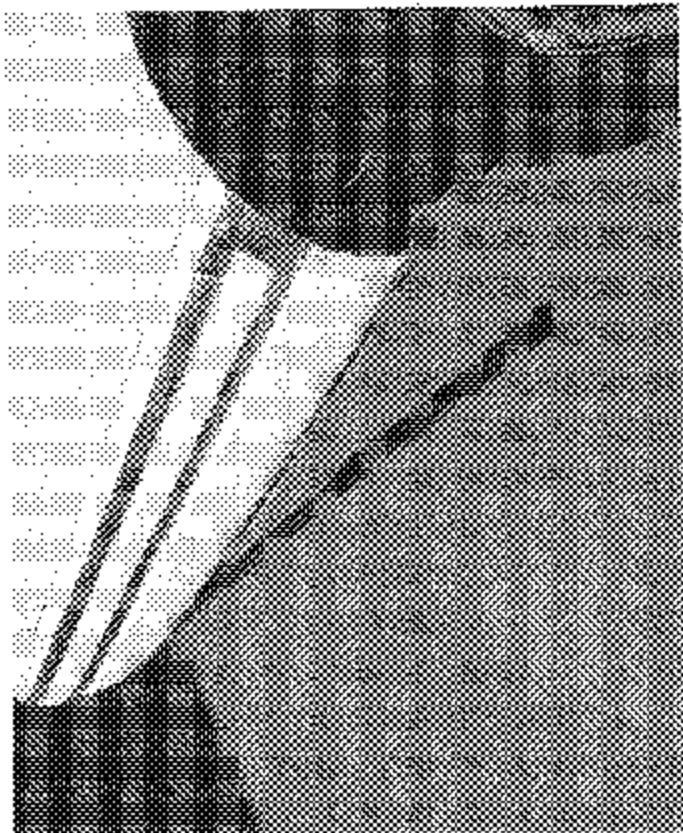
7. D. Meer, Firestone FT70, failed 27 Aug 2000



8. D. Meer, Firestone FT70, failed 27 Aug 2000



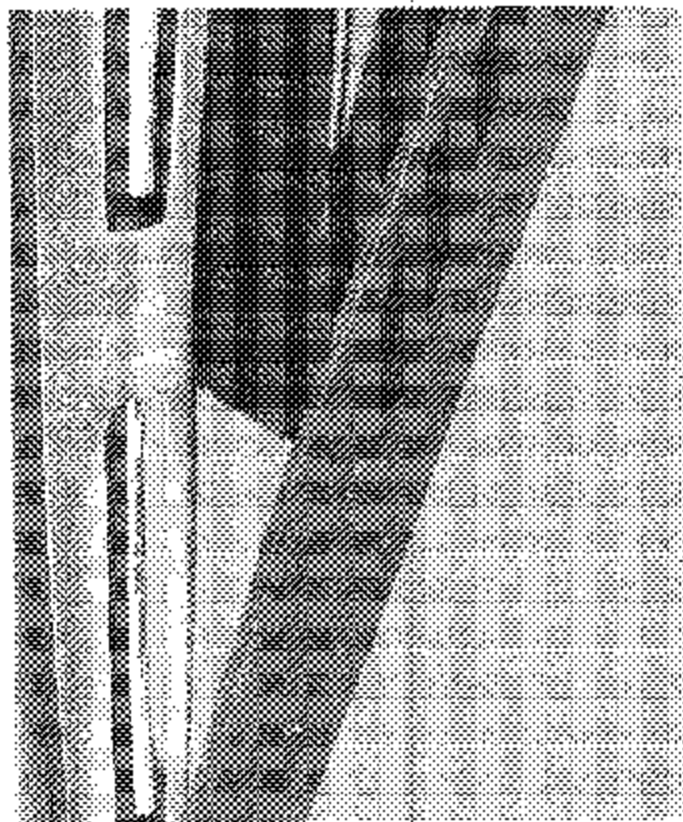
9. D. Meer, Firestone FT79, failed 27 Aug 2000



10. D. Meer, Right rear bumper trim damage



11. D. Meer, Right rear bumper trim damage



12. D. Meer, Right rear bumper trim damage



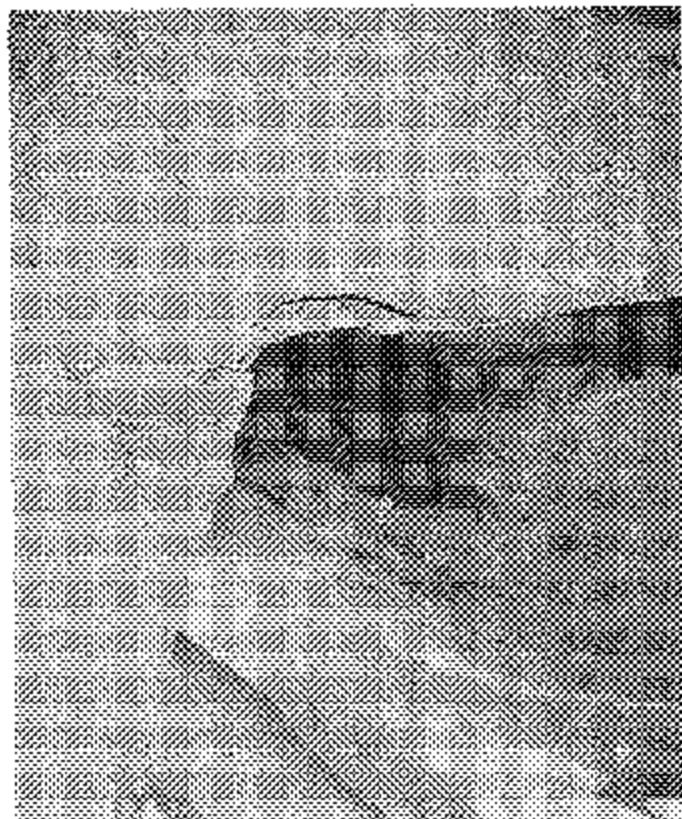
13. D. Roof, Trim and sheet metal damage



14. D. Roof, Trim and sheet metal damage



15. D. Roof, Wheel well point damage



16. D. Roof, Undercarriage sheet metal damage



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.\*

DOT H Y M 3 F T 8 1 8 7

MANUFACTURER/TIRE NAME

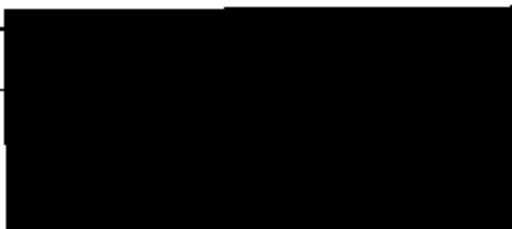
Firestone FT70c

SIZE

215/70R15

\* 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)



★ U.S. G.P.O.: 1982-423-267/80285

U.S. Department of Transportation

National Highway Traffic Safety Administration

400 Seventh St., S.W. Washington, D.C. 20580

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



# Firestone INCIDENT REPORT

#025264


Time and Place	Date of Incident August 27, 2000	Time AM/PM 2:30 PM	Exact Location Where Incident Occurred I-17, Southbound, 215 mi. N of Phoenix		
	Vehicle Make Lincoln	Year 1944	Model Town Car	Mileage 88M	
Customer Vehicle	Owner of Auto				
Property Damage to Customer's Car	Damage to Customer Vehicle \$555.96 - \$643.69 Rear Fender 91 trim, see estimates and pictures		Estimated Cost \$643.69		
	Have you submitted this to your insurance company? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>				
	Are you planning to submit this claim to insurance company? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>				
	Has your vehicle been repaired? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> DEDUCTIBLE AMOUNT				
Customer Insurance Co. (Please include telephone number) USAA 800-531-2111					
Property Damage to Other Car (if applicable)	Was another vehicle involved? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>		Name and Address N/A		
	Damage N/A		Estimated Cost N/A		
	Does Owner of Vehicle Have Insurance? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A		Covering Damages to Car? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A	Covering Damages or Injury to Other Car? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A	
	Other Property Damage N/A				
Injured Person	Was anyone injured? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>		Name and Address N/A		
	Sex Male <input type="checkbox"/> Female <input type="checkbox"/> N/A	Age N/A	Occupation N/A	Has Injured Person Retained an Attorney? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A	
Injury	Nature of Injury N/A				
	Any Disability Involved? N/A				
Witness	Name N/A		Address N/A		
Tire Data (if available)	Size-Type F770C	Mileage on Tire 240M	DOT Number (10 digit # located on sidewall) HYM3 ET8 187	Position Mounted Rt. Rear	
	215 70R15	1/32 tread left, see Filter Inspection			
Description of Incident	I was driving with my wife south bound on I-17 about 15 miles North of Phoenix, AZ at about 6:30 PM on 27 Aug 2000. (continued)				
Signature of Cust				Date Signed 10/15/00	

The weather was clear and the air temperature was about 95°F. I was driving at the speed limit, 75 mph, in ~~the~~ traffic. My wife and I heard a sudden noise from the tires and the car began to vibrate. I immediately began to slow down. Within one quarter mile, there was an impact on the underside of the car. I pulled off the side of the road and stopped. The right rear tire had lost its tread, damaging the trim and fender on the right rear.

I have attached two estimates for repair of the damage to my car and the invoice for replacement of all of the Firestone tires. There was  $\frac{1}{32}$ " tread left on them as shown in the attached Firestone Service Center inspection.

I have also included pictures of the tire showing the explosive tread separation and the damage to my car.

I request that you send me a check covering the cost to repair my car, the cost of the replacement tires (receipt attached), and the cost of shipping the defective tire to Firestone.



\*\*\* FOR AG USE ONLY \*\*\*

LETTER:  
CLOSING:

RT:  
CC:

COPY TO:  
SEND TO:

FILE #: 00-025355  
CATEGORY: PS M63 V CFR85

Review YOUR Name, Affiliation, Address & Phone:



Home Phone



State Name, Address & Phone of the FIRM you are complaining against:

Bridgeston Firestone Tire  
4000 E. Mission Blvd.  
Ontario, CA 91761

zip:

Phone: (909) 673-1430

Please indicate which age category applies to you (for statistical purposes only):

Under 19 ( ); 20-29 ( ); 30-39 ( ); 40-49 ( ); 50-59 (X); 60-69 ( ); 70-79 ( ); 80 plus ( )

May we send a copy of this to the person or firm you are complaining against? Yes (X) No ( )  
(If your response is no, we may be prevented from taking any action on your complaint.)

We may send a copy of your complaint to another government agency for their review or investigation. May we also send a copy to any private agency which resolves disputes like those raised in your complaint? Yes (X) No ( )

Was an oral or written warranty given? Yes (X) No ( )

Did you sign any documents? Yes ( ) No (X)

Date of transaction The Firestone tire on my 1994 Lincoln Towncar

Place of transaction Lost its tread on I-17 North of Phoenix damaging my car.

Witness to transaction \_\_\_\_\_ Salesperson's name \_\_\_\_\_

Total amount of damages (list actual loss only) \$555.96 Damage to my Lincoln TC on 8/27/00

Have you complained to the firm? Yes (X) No ( ) I have filled incident report #023269  
What was their response? attached. Firestone has not responded yet.

Was the product or service advertised? Yes (X) No ( )  
If yes, indicate the date and how it was advertised \_\_\_\_\_

Do you have an attorney? Yes ( ) No (X)  
If yes, please provide the attorney's name and address \_\_\_\_\_

Is any legal action pending? Yes ( ) No ( ) Not for my tires as far as I know

List any other consumer agencies contacted \_\_\_\_\_

Please explain the entire circumstances surrounding your complaint below and on the reverse side of this form. Please fully describe any oral or written misrepresentations made to you I purchased a full set of Firestone

ET70, 215 70R15 tires in 1997. On Sunday 8/27/00, I was driving southbound on I-17 about 15 miles north

This statement is true and accurate to the best of my knowledge.

Signature

Date 10/15/00


David E. Meel

(COMPLAINT CONTINUED)

10/15/00

of Phoenix with my wife in the car. We very suddenly heard loud tire noise and the car started vibrating. I immediately started slowing down from the 75 mph speed limit. Within 1/4 mile, the tread separated from the right rear tire, damaging the body of my car. The tire tread separated between the steel ~~ply~~ plys and hit the undercarriage of my car. I was able to pull off the road and stop the car. There were no injuries.

I have since replaced all four tires with another brand and have filed a claim with Firestone. A copy is attached, along with pictures of the tire and of the damage to my car. I have also included two estimates for the repair to my car.

  
10/15/00

09/15/2000 at 10:11 AM  
18708

Job Number:

**BERGE MAZDA/VOLKSWAGEN**  
License #:18708 Federal ID #:860190327  
1515 W. BROADWAY RD.  
MESA, AZ 85202  
(480)833-0001 Fax: (480)649-5696

**PRELIMINARY ESTIMATE**

Written by: Jim Jorgensen #18708  
Adjuster:

Insured: [REDACTED] Claim #  
Owner: [REDACTED] Policy #  
Address: [REDACTED] ST Deductible:  
Day: [REDACTED] 0 Date of Loss:  
Type of Loss:  
Point of Impact:

Inspect  
Location:

Insurance  
Company:

Days to Repair

1994 LINC TOWN CAR EXECUTIVE 8-4.6L-P1 4D SED WHITE Int:  
VIN: 1LNLM81W1RY737074 Lic: Prod Date: 04/1994 Odometer: 88900  
Air Conditioning Rear Defogger Tilt Wheel  
Cruise Control Intermittent Wipers Auto Level  
Climate Control Elec. Instrumentation Keyless Entry  
Tinted Glass Body Side Moldings Dual Mirrors  
Clear Coat Paint Power Steering Power Brakes  
Power Windows Power Locks Power Driver Seat  
Power Passenger Seat Power Antenna Power Mirrors  
Power Trunk Anti-Lock Brakes (4) Driver Airbag  
Passenger Airbag 4 Wheel Disc Brakes Cloth Seats  
Split Bench Seats Recline/Lounge Seats Alloy Wheels

NO.	OP.	DESCRIPTION	QTY	EXT.	PRICE	LABOR	PAINT
1		REAR BUMPER					
2*	Repl	RT Stone deflector	1		35.70	0.4	<u>0.0</u>
3		QUARTER PANEL					
4*	Rpr	RT Quarter panel				<u>2.0</u>	<u>1.5</u>
5		Add for Clear Coat					0.6
6	Repl	RT Body side mldg	1		49.30	0.4	
7		REAR DOOR					
8	Blnd	RT Outer panel					1.2
9	R&I	RT Body side mldg				0.4	
10	R&I	RT Handle, outside				0.3	
11	R&I	R&I trim panel				0.4	
12*	R&I	Belt w'strip				<u>0.2</u>	
13#	Rpr	TINT COLOR				0.5	
14#	Repl	COVER CAE	1		5.00 F	0.2	

09/15/2000 at 10:11 AM  
18708

Job Number:

**PRELIMINARY ESTIMATE**

1994 LINC TOWN CAR EXECUTIVE 8-4.6L-FI 4D SED WHITE Int:

NO.	QP.	DESCRIPTION	QTY	EXT.	PRICE	LABOR	PAINT
15#	Rpr	COLOR SAND & BUFF				1.0	
16		OTHER CHARGES					
17#		E.P.C.	1		3.50		
Subtotals ==>				93.50		5.8	3.3
Parts							85.00
Body Labor							5.8 hrs @ \$ 40.00/hr 232.00
Paint Labor							3.3 hrs @ \$ 40.00/hr 132.00
Paint Supplies							3.3 hrs @ \$ 26.00/hr 85.80
Sublet/Misc.							5.00
Other Charges							3.50
SUBTOTAL							\$ 543.30
Sales Tax							\$ 175.80 @ 7.2000% 12.66
GRAND TOTAL							\$ 555.96
ADJUSTMENTS:							
Deductible							0.00
CUSTOMER PAY							\$ 0.00
INSURANCE PAY							\$ 555.96

Estimate based on MOTOR CRASH ESTIMATING GUIDE. Non-asterisk(\*) items are derived from the Guide DR2KA90. Database Date 7/2000. Double asterisk(\*\*) items indicate parts supplied by a supplier other than the original equipment manufacturer. Pound sign (#) items indicate manual entries. CAPA items have been certified for fit and finish by the Certified Auto Parts Association. NAGS Part Numbers, Prices and Labor Times are provided from National Auto Glass Specifications, Inc.

Pathways - A product of CCC Information Services Inc.

09/19/2000 at 01:12 PM  
60688

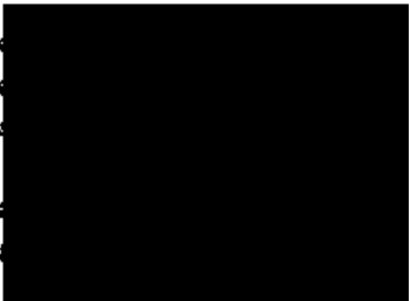
Job Number:

JACK ROSS LINCOLN MERCURY  
Federal ID #:860128927  
ARIZONA OLDEST LINCOLN/MERCURY DEALER  
1900 N. SCOTTSDALE ROAD  
TEMPE, AZ 85281  
(480)947-8321 Fax: (480)505-0084

PRELIMINARY ESTIMATE

Written by: JIM BRADY #  
Adjuster:

Insured  
Owner  
Address  
D  
Business



Claim #  
Policy #  
Deductible:  
Date of Loss:  
Type of Loss:  
Point of Impact: 5. Right Rear

Inspect  
Location:

Insurance  
Company:

Days to Repair

1994 LINC TOWN CAR EXECUTIVE 8-4.6L-FI 4D SED Int:  
VIN: 1LNLM81W1RY737074 Lic: 805-BKE AZ Prod Date: Odometer:  
Air Conditioning Rear Defogger Tilt Wheel  
Cruise Control Intermittent Wipers Auto Level  
Climate Control Elec. Instrumentation Keyless Entry  
Tinted Glass Body Side Moldings Dual Mirrors  
Clear Coat Paint Power Steering Power Brakes  
Power Windows Power Locks Power Driver Seat  
Power Passenger Seat Power Antenna Power Mirrors  
Power Trunk Anti-Lock Brakes (4) Driver Airbag  
Passenger Airbag 4 Wheel Disc Brakes Cloth Seats  
Split Bench Seats Recline/Lounge Seats Alloy Wheels

09/19/2000 at 01:12 PM  
60688

Job Number:

**PRELIMINARY ESTIMATE**

1994 LINC TOWN CAR EXECUTIVE 8-4.6L-FI 4D SED Int:

NO.	OP.	DESCRIPTION	QTY	EXT. PRICE	LABOR	PAINT
1		PILLARS, ROCKER & FLOOR				
2	Repl RT	Rocker molding	1	109.03	0.4	0.0
3		REAR BUMPER				
4*	Repl RT	Stone deflector	1	35.70	0.4	0.0
5		QUARTER PANEL				
6*	Rpr RT	Inner wheelhouse	0	0.00	4.5	0.0
7#	Repl	UNDER COAT DAMAGE AREA	1	0.00	1.0	0.0
8	R&I RT	Body side mldg	0	0.00	0.4	0.0
9*	Rpr RT	Quarter panel	0	0.00	1.0	2.7
10		Add for Clear Coat	0	0.00	0.0	1.1
Subtotals ==>				144.73	7.7	3.8

Estimate Notes:

POSSIBLE MORE DAMAGE AFTER TEAR DOWN. THIS NOT A COMPLETE ESTIMATE

Parts		144.73
Parts Discount	\$ 144.73 -10.0%	-14.47
Body Labor	7.7 hrs @ \$ 36.00/hr	277.20
Paint Labor	3.8 hrs @ \$ 36.00/hr	136.80
Paint Supplies	3.8 hrs @ \$ 22.00/hr	83.60

SUBTOTAL		\$ 627.86
Sales Tax	\$ 213.86 @ 7.4000%	15.83

GRAND TOTAL \$ 643.69

ADJUSTMENTS:

Deductible 0.00

CUSTOMER PAY \$ 0.00

INSURANCE PAY \$ 643.69

09/19/2000 at 01:12 PM  
60688

Job Number:

**PRELIMINARY ESTIMATE**

1994 LINC TOWN CAR EXECUTIVE 6-4.6L-FI 4D SED Int:

THIS ESTIMATE IS BASED ON OUR INSPECTION AND DOES NOT COVER ADDITIONAL PARTS OR LABOR WHICH MAY BE REQUIRED AFTER THE WORK HAS BEEN STARTED. AFTER THE WORK HAS STARTED, WORN OR DAMAGED PARTS WHICH WERE NOT EVIDENT ON THE FIRST INSPECTION MAY BE DISCOVERED. NATURALLY, THIS ESTIMATE CANNOT COVER SUCH CONTINGENCIES. JACK ROSS LINCOLN / MERCURY WILL NOT BE RESPONSIBLE FOR ANY THEFT OF ITEMS LEFT IN VEHICLE.

Estimate based on MOTOR CRASH ESTIMATING GUIDE. Non-asterisk(\*) items are derived from the Guide DR2KA90. Database Date 7/2000. Double asterisk(\*\*) items indicate parts supplied by a supplier other than the original equipment manufacturer. Pound sign (#) items indicate manual entries. CAPA items have been certified for fit and finish by the Certified Auto Parts Association. NACS Part Numbers, Prices and Labor Times are provided from National Auto Glass Specifications, Inc.

Pathways - A product of CCC Information Services Inc.

QUOTE  
079164  
09/02/2000

FIRESTONE TIRE & SERVICE CENTERS  
1239 W GUADALUPE  
MESA, AZ. 85202

SERVICE ADVISOR:  
03 Nancy  
480.831.7857

LIC #  
IN 09/02/00 3:28PM

VIN #  
EST. MILEAGE 0

Store # 027022

QUOTE

Description	Article Number	T#	Qty	Part	Labor	Extended Price	Job Total
<b>BRIDGESTONE TIRE PACKAGE</b>							263.16
TURANZA T TUWSPS 21570R15	040479		4	93.99		375.96	
ROAD HAZARD WARRANTY	7040215		4	14.10		56.40	
TIRE INSTALLATION	7015016		4		N/C	N/C	
7016381 CUSTOMER SATISFACTION-FT70C'S - 1-SEPO-ALL TREAD REMAINING AT 6/32NDS -	7016381		-4		42.30	-169.20	

Prices valid for 30 days.

Summary

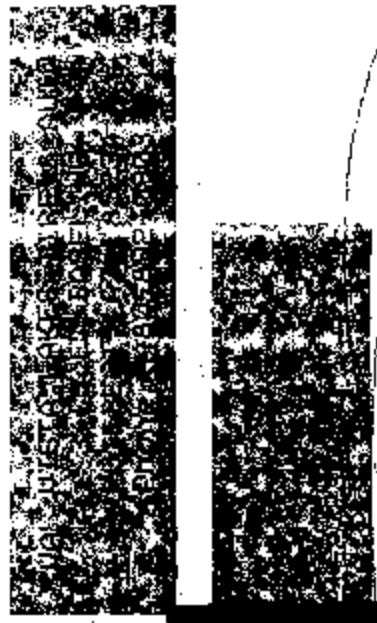
Parts	432.36
Labor	-169.20
Shop Supplies	0.00
Sub	263.16
Tax	31.14
Total	294.30

See reverse side for Warranty Information

Quote 991117



**BIG O TIRES**  
Proudly Made  
In America



DATE	INVOICE NO.
ACCOUNT NO.	PAGE

SALESMAN	LICENSE	YEAR	MAKE	MODEL	MILEAGE	TYPE OF PAYMENT
CLAYTON	941	88	941	CL		
QTY	STOCK NO.	DESCRIPTION	LABOR	FET	PRICE	EXT. PRICE
4		215/70R15 PIRELLI P4000	8.00		70.95	315.00
4		JUNK TIRE DISPOSAL FEE				0.00
4		VALVE STEM			3.00	12.00
4		BALANCE	9.50			38.00
<small>TERMS: (NET 10th PROX.) PAST DUE CHARGE IS COMPUTED BY A "PERIODIC RATE" OF 2% PER MONTH ON UNPAID BALANCE WHICH IS AN ANNUAL PERCENTAGE RATE OF 24%. IF NECESSARY TO INSTITUTE LEGAL ACTION TO ENFORCE COLLECTION OF THE AMOUNT DUE UNDER THIS INVOICE, BUYER AGREES TO PAY ALL NECESSARY COSTS AND ATTORNEY'S FEES.</small>						
TOTAL						367.00
SALES TAX						23.60
ENVR. TAX						6.32
LABOR						46.08
PAY THIS AMOUNT						443.72

CUSTOMER SIGNATURE \_\_\_\_\_

*Cost to replace defective Firestone tires*