



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 150

Date Received

19-DEC-2000

Od_or _____
rt_dt _____
od_rt _____
up_ltr _____

Reference No.

876728

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 drivers side)</small>	Vehicle Make	Vehicle Model	Vehicle Year	Current Odometer Reading
WBAGJ8323TDL37490	BMW	740IL	1996	

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 <input type="checkbox"/> Manual <input type="checkbox"/> Automatic	Antilock Brakes <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Restraint System <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	Cruise Control <input checked="" type="checkbox"/> Yes <input 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 Ult. Truck <input type="checkbox"/> Motorcycle	Body Style <input type="checkbox"/> 2-Door <input 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 13730000	Par. Name(s) STRUCTURE:HOOD ASSEMBLY:LATCHES	Location <input type="checkbox"/> Left <input type="checkbox"/> Frnt <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) _____ Mileage at Failure(s) _____ 40000 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 <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
--	---	---------------------------	----------------------	---------------------------	---

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

HOOD CAME CRASHING UP AGAINST WINDSHIELD WHILE DRIVING ON FREEWAY. THIS COULD HAVE CAUSED A CRASH. *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.



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

160

Date Received **RECEIVED**
19-DEC-2000
rt_dt
ed_rt
up_ltr

Reference No.
876726

OWNER INFORMATION (Type or Print)

662442

Work Number
Home Number

Do you authorize NHTSA to provide a copy of report to the manufacturer of your vehicle?
 YES NO
in the absence of an owner's signature and address to the vehicle manufacturer.
Signature of Owner _____ Date 1/08/01

VEHICLE INFORMATION

Vehicle Ident. No. (VIN) (located at bottom of windshield on driver's side) WBAGJ8323TDL37490	Vehicle Make BMW	Vehicle Model 740IL	Vehicle Year 1996	Current Odometer Reading 43987
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Purchase Date	Dealer's Name <u>BMW of Danvers</u>	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 <u>Danvers</u> State <u>CT</u> Zip Code _____	No Cylinders _____	

Transmission Type <input type="checkbox"/> Manual <input type="checkbox"/> Automatic	Antilock Brakes <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Restraint System <input type="checkbox"/> 3-Point Belt <input checked="" type="checkbox"/> Driverside Airbag <input type="checkbox"/> Motorbelt <input type="checkbox"/> 2-Point Belt <input checked="" type="checkbox"/> Passengerside Airbag	Cruise Control <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	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"/> Van <input type="checkbox"/> Minivan <input type="checkbox"/> Other	Sport Utl <input type="checkbox"/> Truck <input type="checkbox"/> Motorcycle	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 13730008	Part Name(s) STRUCTURE:HOOD ASSEMBLY:LATCHES	Location <input type="checkbox"/> Left <input checked="" type="checkbox"/> Front <input type="checkbox"/> Right <input type="checkbox"/> Rear	Failed Part(s) <input checked="" type="checkbox"/> Original <input type="checkbox"/> Replacement
------------------------------	--	---	--

No of Failures	Date(s) of Failure(s) Mileage at Failure(s) <u>40000 43987</u> Vehicle Speed at Failure(s) <u>40 MPH</u>	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 <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
--	---	---------------------------	----------------------	---------------------------	---

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

HOOD CAME CRASHING UP AGAINST WINDSHIELD WHILE DRIVING ON FREEWAY. THIS COULD HAVE CAUSED A CRASH. *AK

CONTINUE ON BACK IF NEEDED

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January 8, 2001

U.S. Department of Transportation
National Highway Traffic Safety Administration
400 Seventh Street, S.W./Room #5326 ODI
Washington, D.C. 20590-1000

RECEIVED
OFFICE
OFFICE OF INVESTIGATION

RE: *Reference #876728*

To Whom It May Concern:

I have enclosed the following information concerning reference number 876728.

The incident concerned the hood of the car on November 10, 2000, smashing onto the window assembly of the car and blocking the vision of the driver on the federal highway:

1. Letters to BMW concerning the incident.
2. Repair order from BMW of Manhattan concerning the repair of the item.

The first unanswered question is why did the hood open?


The second unanswered question is why did the safety mechanism for the hood not catch the hood?

The miracle in this incident is that the car was driven to the side of the highway with no additional damage to the car and a serious accident was avoided.

The car has been repaired by BMW at their expense and is sitting at the BMW dealership in Manhattan. Does the National Highway Traffic Safety Administration desire to inspect the car prior to being picked up by the lessees?

Yours truly,




Enclosures
2272



U.S. Department
of Transportation

**National Highway
Traffic Safety
Administration**

400 Seventh Street, S.W.
Washington, D.C. 20590

Dear Consumer:

As a result of your recent inquiry to the National Highway Traffic Safety Administration's Auto Safety Hotline, we developed the enclosed Vehicle Owner's Questionnaire. Please review the form and supply any additional information you have that you believe is relevant to your safety problem(s). You may also include copies of repair bills, letters to manufacturers, or any other documents related to the problem(s).

Please complete the questionnaire, fold, staple, or tape it so that the pre-addressed portion is on the outside.

We will share this information with the appropriate manufacturer may help resolve your problem(s). It is helpful to be thorough in your report so that our ability to use your information will be maximized. It is not necessary to complete all boxes if you are not sure of the information. It is very difficult to pursue complaints unless the Vehicle Identification Number (VIN) is known, and when reporting a tire problem, the DOT Identification is needed. The VIN is located inside the vehicle adjacent to the left of the windshield pillar (driver's side). The tire identification number contains 7 to 11 characters and is preceded by the letters "DOT" on the tire between the maximum width section and the bead, usually near the rim flange on the opposite side of the whitewall or on either side of a blackwall tire.

Any information you provide on this questionnaire is **ENTIRELY VOLUNTARY**. There is **NO CONSEQUENCE** or **PENALTY** of any kind if you **DO NOT** wish to provide it. We seek this information so that this agency can help you and other owners with similar problems and to allow us to combine this information with similar owner reports to develop both statistical and investigatory evidence which will help identify potential safety-related problems in motor vehicles or items of motor vehicle equipment.

Sincerely,

Information Management Branch
Auto Safety Hotline

2 Enclosures:
Self-addressed Questionnaire
Auto Safety Hotline Pamphlet



AUTO SAFETY HOTLINE
(800) 424-9393
Wash. D.C. Area 366-0123

TDL37490

1 2 4 0 6 2

BMW OF MANHATTAN INC.

555 WEST 57TH ST
 NEW YORK, NY 10019
 212/586-2BMW
 N.Y.S. LISC. NO. 7055585

INVOICE

DUPLICATE 1
 PAGE 1

SERVICE ADVISOR: 460 CHRIS BLANCO

COLOR	YEAR	MAKE/MODEL	VIN	LICENSE	MILEAGE IN/OUT	TAC	
BLUE	96	BMW 740IL	WBAGJ8323TDL37490	100NER	43987/43987	T1300	
DEL DATE	PRD DATE	WARH EXP	PROMISED	PD NO	RATE	PAYMENT	INV DATE
21MAR1996			15:00 20NOV00		102.50	CASH	14DEC2000

R/O OPENED: 13:19 10NOV00 READY: 12:45 14DEC00
 OPTIONS: DLR:86310 1) PROD DATE: 2/96 2) CPO EXP: 100K MILES 3) OR 3/21/02

LINE	OPCODE	TECH	TYPE	HOURS	LIST	NET	TOTAL
A C/S HOOD BLEW OPENED WHILE DRIVING THIS MORNING. REPORT ON HOOD LATCH MECH. AND SAFETY							

CAUSE: E
 BW BODY WORK AS PER ESTIMATE
 1MRS94 0.00 (N/C)
 1 41-61-8-183-124 ENG. HOOD (N/C)
 1 51-23-8-164-766 HOOD CATCH (N/C)
 1 51-23-8-164-763 CATCH (N/C)
 1 51-23-8-164-764 CATCH (N/C)
 1 41-61-8-203-271 LEFT HINGE (N/C)
 1 41-61-8-203-272 RIGHT HINGE (N/C)
 4 07-11-9-915-021 HEX SCREW (N/C)
 6 51-48-1-918-864 RIVET (N/C)
 2 51-18-8-122-524 BOLT (N/C)
 2 51-23-8-150-877 PIN (N/C)
 FC: PART#: COUNT:
 CLAIM TYPE: 1
 AUTH CODE:

INSPECT HOOD FOR DAMAGE FOUND THE HOOD PANEL WAS DAMAGED DUE TO IT OPENING WHILE DRIVING. OPEN HOOD AND INSPECT HOOD. FOUND THAT THE SAFETY HOLD DOWN PIN ON THE LEFT SIDE HOOD LEG WAS MISSING, THIS PIN HOLDS THE HOOD DOWN AFTER THE HOOD IS OPEN. TO REPAIR THE DAMAGE HOOD PANEL, REPLACE THE HOOD LOCK ASSEMBLY WITH THE NEW SAFETY HOLD DOWN PIN. IN ORDER FOR THE HOOD TO OPEN THE SAFETY HOLD DOWN HOOD LOCK MUST BE OPEN, INSPECT THE MAIN HOOD LOCK ASSY.

B** INSPECT HOOD AND HOOD SAFETY WITH FOUND DEFECTIVE SAFETY CAUSING THE HOOD TO OPEN WHILE DRIVING AND DAMAGED THE HOOD PANEL REPAIR AS NEEDED AS PER RAY JAHN BMW OF N.A.

CAUSE: GOODWILL
 SUB SUBLET REPAIRS
 606MAR94 0.00 (N/C)
 FC: 51230040ER

ON BEHALF OF SERVICING DEALER, I HEREBY CERTIFY THAT THE INFORMATION CONTAINED HEREON IS ACCURATE UNLESS OTHERWISE SHOWN. SERVICES DESCRIBED WERE PERFORMED AT NO CHARGE TO OWNER. THERE WAS NO INDICATION FROM THE APPEARANCE OF THE VEHICLE OR OTHERWISE, THAT ANY PART REPAIRED OR REPLACED UNDER THIS CLAIM HAD BEEN CONNECTED IN ANY WAY WITH ANY ACCIDENT, NEGLIGENCE OR MISUSE. RECORDS SUPPORTING THIS CLAIM ARE AVAILABLE FOR (1) YEAR FROM THE DATE OF PAYMENT NOTIFICATION AT THE SERVICING DEALER FOR INSPECTION BY MANUFACTURER'S REPRESENTATIVE.	STATEMENT OF DISCLAIMER	DESCRIPTION	TOTALS
	The factory warranty constitutes all of the warranties with respect to the sale of the item/terms. The Seller hereby expressly disclaims all warranties, either express or implied, including any implied warranty of merchantability or fitness for a particular purpose. Seller neither assumes nor authorizes any other person to assume for it any liability in connection with the sale of this item/terms.	LABOR AMOUNT	
(SIGNED) DEALER, GENERAL MANAGER OR AUTHORIZED PERSON DATE)	CUSTOMER SIGNATURE	PARTS AMOUNT	
		GAS, OIL, LUBE	
		SUBLET AMOUNT	
		MISC. CHARGES	
		TOTAL CHARGES	
		LESS INSURANCE	
		SALES TAX	
		PLEASE PAY THIS AMOUNT	

CUSTOMER COPY

TDL37490

1 2 4 0 6 2

BMW OF MANHATTAN INC.

555 WEST 57TH ST
NEW YORK, NY 10019
212/586-2BMW
N.Y.S. LIC. NO. 7055585

INVOICE

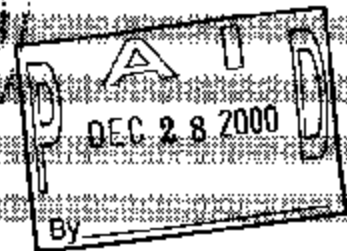
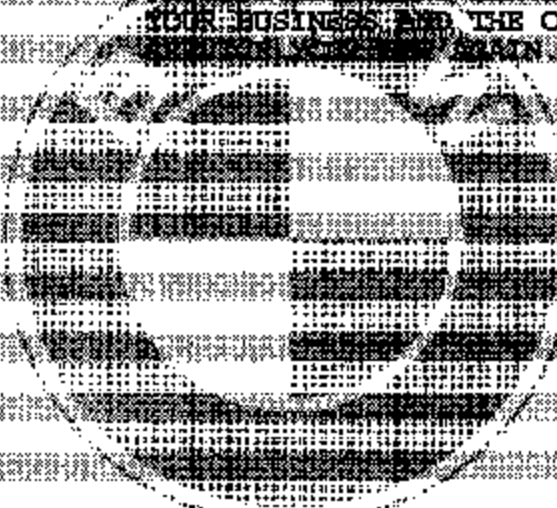
DUPLICATE 1
PAGE 2

SERVICE ADVISOR: 460 CHRIS BLANCO

COLOR	YEAR	MAKE/MODEL	VIN	LICENSE	MILEAGE IN/OUT	TAG	
BLUE	96	BMW 740IL	WBAGJ8323TDL37490	100NER	43987/43987	T1300	
DEL DATE	PROD DATE	WARR EXP	PROMISED	PO NO.	RATE	PAYMENT	INV DATE
21MAR1996			15:00 20NOV00		102.50	CASH	14DEC2000
H.O. OPENED		READY		OPTIONS: DLR:86310 1) PROD DATE: 2/96 2) CPO EXP: 100K MILES 3) OR 3/21/02			
13:19	10NOV00	12:45	14DEC00				

LINE	OPCODE	TECH	TYPE	HOURS	LIST	NET	TOTAL
PARTS:							
COUNT:							
CLAIM TYPE: 1							
AUTH CODE:							

 THANK YOU FOR SERVICING YOUR VEHICLE AT
 BMW OF MANHATTAN INC. OUR GOAL IS TO
 PROVIDE EXCELLENT SERVICE. WE APPRECIATE
 YOUR BUSINESS AND THE OPPORTUNITY TO
 SERVE YOU AGAIN.



Called 12/19/00 4/19. 10:30 AM. 1/19 12/21

ON BEHALF OF SERVICING DEALER, I HEREBY CERTIFY THAT THE INFORMATION CONTAINED HEREON IS ACCURATE UNLESS OTHERWISE SHOWN. SERVICES DESCRIBED WERE PERFORMED AT NO CHARGE TO OWNER. THERE WAS NO INDICATION FROM THE APPEARANCE OF THE VEHICLE OR OTHERWISE, THAT ANY PART REPAIRED OR REPLACED UNDER THIS CLAIM HAD BEEN CONNECTED IN ANY WAY WITH ANY ACCIDENT, NEGLIGENCE OR MISUSE. RECORDS SUPPORTING THIS CLAIM ARE AVAILABLE FOR (1) YEAR FROM THE DATE OF PAYMENT NOTIFICATION AT THE SERVICING DEALER FOR INSPECTION BY MANUFACTURER'S REPRESENTATIVE.	STATEMENT OF DISCLAIMER	DESCRIPTION	TOTAL
	The factory warranty constitutes all of the warranties with respect to the sale of this merchandise. The Seller hereby expressly disclaims all warranties, either express or implied, including any implied warranty of merchantability or fitness for a particular purpose. Seller neither assumes nor authorizes any other person to assume for it any liability in connection with the sale of this merchandise.	LABOR AMOUNT	
(SIGNED) DEALER, GENERAL MANAGER OR AUTHORIZED PERSON (DATE)	CUSTOMER SIGNATURE	PARTS AMOUNT	0.00
		GAS, OIL, LUBE	0.00
		SUBLET AMOUNT	0.00
		MISC. CHARGES	0.00
		TOTAL CHARGES	0.00
		LESS INSURANCE	0.00
		SALES TAX	0.00
		PLEASE PAY THIS AMOUNT	0.00

CUSTOMER COPY



December 14, 2000

BMW of North America
Customer Relations
300 Chestnut Ridge Road
Woodcliff Lake, New Jersey 07675

RE: *BMW - Model #740IL*
Account #3000191063

Attention: Customer Relations

I wrote back on November 10, 2000 concerning a serious defect with the hood of my leased BMW. The hood came smashing into the windshield frame blocking visibility of the highway. I have not received a formal written response to this defect. Please write back concerning this incident.

In addition, the finance charge from BMW Financial Services requires to be frozen until the car is certified to drive and a plausible explanation is given as to the cause of this defect.

We would appreciate a prompt response.

Yours truly,

do

2263

BMW Financial Services Account Statement



BMW Customer Communication Center
P.O. Box 3608 Dublin, Ohio 43016-0308

For information or questions concerning your
account please contact 1-800-578-5000.
Visit our website at www.bmwusa.com

A0001080/BMW* 004 000



Account Number	Make	Model
3000191083	BMW	740iL
Maturity Date	Serial Number	
11/27/01	WBAGJ6323TDL37490	
Months Remaining	Next Month's statement will reflect activity after	
11	12/08/00	

In order to keep your vehicle properly maintained, see your BMW Center for all your service needs. Your BMW Center:

CONTINENTAL BMW OF DARIEN

Date	Description of Charges and Credits	Charges	Credits
12/27/00	Previous Balance	1306.83	
	Lease Payment	759.76	
	Account Total - New Balance	2066.69	

CORPORATE ACCOUNTS PAYABLE

Department _____

Amount _____

Expense Code _____

Approval _____

RECEIVED
DEC 14 2000
CORPORATE

View your current payoff, update your address, even extend your lease on-line! Enroll with your Vehicle Identification Number (VIN) and Financial Services account number in Owners' Circle today at www.bmwusa.com.

Redeem your BMW Reward Points for free air travel, free BMW merchandise, rebates on your next BMW lease or loan or other great rewards. The new BMW family of Credit Card products offers you these rewards and more. For more information or to apply, call 1-888-BMW-CARD.

(Please Detach Bottom Portion And Return With Payment. Please Include Your Account Number On Your Check.)

BMW Financial Services Payment Coupon



- Please check here and complete the reverse side for address and telephone number changes.
- Please check here to receive information to make automatic payments through our EasyPay program.



Account Number	Date	Amount Due
3000191063	12/27/00	\$2,066.59


Make check payable to:

BMW Financial Services
P.O. Box 9001065
Louisville, KY 40290-1065



30001910637 04112710770 002066592 200032270

Yes



November 10, 2000

BMW North America
Customer Relations
300 Chestnut Ridge Road
Woodcliff Lake, New Jersey 07675

RE: **BMW - Model # 740IL**
Account # 3000191063


Attention: Customer Relations

This letter will confirm my conversation today, November 10, 2000, with Stuart Kestenbaum, at BMW - telephone # 212-314-9743.

Please be advised that this morning while I was driving on the Cross Bronx Expressway the hood of my BMW, which I lease, popped open blocking my entire vision from the road and almost caused an accident. The hood of the BMW is severely damaged.

We view it as a miracle that we did not get injured and we view this as a severe defect with the car. We want to return the car to BMW.

Yours truly,



MESSAGE CONFIRMATION

12/14/2000 16:39

DATE	S,R-TIME	DISTANT STATION ID	MODE	PAGES	RESULT
12/14	01'07"	201 930 8362	CALLING	04	OK 0000

12/14/2000 16:37

NO. 354 001



TRANSMITTAL FORM

TO: Customer Relations TO: _____

NO. 201-930-8362 NO. _____

TO: _____ TO: _____

NO. _____ NO. _____

FROM: _____

Number of Pages: 2
(Total Pages)

MESSAGE CONFIRMATION

12/14/2000 10:34

DATE	S.R-TIME	DISTANT STATION ID	MODE	PAGES	RESULT
12/14	00'36"	201 930 8362	CALLING	02	OK 0000

12/14/2000 10:33

NO. 347 001



ZECKEND
REALTY.

TRANSMITTAL FORM

TO: Customer Relations TO: Service Dept

NO. 201-930-8362 NO. 203-656-1802

TO: Barry Halseg TO: _____

No. 867-3458 NO. _____

FROM:

Number of Pages: 2
(Incl. Cover)

November 10, 2000

Ms. Michelle Flug
Customer Relations
555 W. 57th Street
New York, New York 10018

RE: **BMW - Model # 740IL**
Account # 3000191063

Dear Ms. Flug

This letter will confirm my conversation today, November 10, 2000, with Stuart Kestenbaum, at BMW - telephone # 212-314-9743.

Please be advised that this morning while I was driving on the Cross Bronx Expressway the hood of my BMW, which I lease, popped open blocking my entire vision from the road and almost caused an accident. The hood of the BMW is severely damaged.

We view it as a miracle that we did not get injured and we view this as a severe defect with the car. We want to return the car to BMW.

Yours truly,



A subsidiary of BMW AG

BMW Financial Services NA, Inc. Account Statement

1-800-820-4269



BMW Customer Communication Center
P.O. Box 3608, Dublin, Ohio 43016-0306

For information or questions concerning your account please contact 1-800-578-5000.

RECEIVED

JAN 24 2000

CORPORATE ACCOUNTING



3000181063	BMW	740iL
11/27/01	WBAGJ8323TDL37490	
22	01/11/00	

In order to keep your vehicle properly maintained, see your BMW Centre for all your service needs. Your BMW Centre:

CONTINENTAL BMW OF DARIEN

Date	Description of Charges and Credits	Charges	Credits
	Previous Balance	805.35	
01/04/00	Payment Received. Thank You		805.35
01/10/00	Property Tax NEW CANAAN, CT, 12/98-9/99	506.16	
01/27/00	Lease Payment	759.76	
01/27/00	State Sales/Usage Tax	45.50	
	Account Total - New Balance	1321.51	

ALAN J. KEY
1/24/00

CORPORATE ACCOUNTS PAYABLE **RS**

Department: _____

Amount: 805.35

Expense Code: _____

ENTERED
JAN 24 2000

To improve customer satisfaction, the mailing date of your invoice has been changed. This will ensure that the most current and accurate account information is presented to you on a monthly basis.

(Please Detach Bottom Portion and Return With Payment. Please Include Your Account Number On Your Check.)

1-800-831-1117
BMW North America
Customer Service
300 Chestnut Ridge Rd
Woodcliff Lake, NJ 07675
201-930-8362
BMW Customer Relations

MESSAGE CONFIRMATION

11/10/2000 13:36

DATE	S.R-TIME	DISTANT STATION ID	MODE	PAGES	RESULT
11-10	00'34"	1 212 314 9795	CALLING	02	OK 0000

11/10/2000 13:35

NO. 946 001



TRANSMITTAL FORM

TO: Michelle F. Log

TO: _____

NO. 314-9795

NO. _____

TO: _____

TO: _____

NO. _____

NO. _____

FROM: _____

Number of Pages: 2
(Incl. Cover)



November 10, 2000

BMW North America
Customer Relations
300 Chestnut Ridge Road
Woodcliff Lake, New Jersey 07675

RE: **BMW -- Model # 740IL**
Account # 3000191063

Attention: Customer Relations

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Yours truly,



MESSAGE CONFIRMATION

12/14/2000 10:34

DATE	S.R-TIME	DISTANT STATION ID	MODE	PAGES	RESULT
12/14	00'36"	201 930 9362	CALLING	02	OK 0000

12/14/2000 10:33

NO.347 001



TRANSMITTAL FORM

TO: Customer Relations TO: Service Dept

NO. 201-930-8362 NO. 203-656-1802

TO: Barry Madeg TO: _____

NO. 867-3458 NO. _____

FROM: _____

Number of Pages: 2
(Incl. Cover)