

 <p>U.S. Department of Transportation National Highway Traffic Safety Administration</p>		<p>DOT Auto Safety Hotline</p> <p><b>Vehicle Owner's Questionnaire (VOQ)</b></p> <p>NATIONWIDE 1-888-DASH-2-DOT 1-888-327-4236 www.nhtsa.dot.gov/hotline</p>		<p><b>FOR AGENCY USE ONLY</b> 758</p>	
<p><b>OWNER INFORMATION (Type or Print)</b></p>		<p>Date Received <b>28-DEC-2000</b></p>		<p>Od_or _____ rl_dt _____ od_rt _____ up_ltr _____</p>	
<p>663521</p>		<p>Reference No. <b>877142</b></p>		<p>Work Number _____ Home Number _____</p>	
<p>Do you authorize NHTSA to provide a copy of report to the manufacturer of your vehicle? <input type="checkbox"/> YES <input type="checkbox"/> NO In the absence of an authorization, NHTSA WILL NOT provide your name and address to the vehicle manufacturer.</p>					
<p>Signature of Owner _____ Date ____/____/____</p>					
<b>VEHICLE INFORMATION</b>					
<p>Vehicle Ident. No. (VIN) (Located at bottom of windshield on driver's side) <b>2MESM74W81X822028</b></p>		<p>Vehicle Mak <b>MERCURY</b></p>	<p>Vehicle Model <b>MYSTIQUE</b></p>	<p>Vehicle Year <b>2001</b></p>	<p>Current Odometer Reading</p>
<p>Purchase Date <input checked="" type="checkbox"/> New <input type="checkbox"/> Used</p>		<p>Dealer's Name _____ City _____ State _____ Zip Code _____</p>		<p>Engine Siz (CID/CC/L) _____ No Cylinders _____</p> <p><input type="checkbox"/> Turbo <input type="checkbox"/> Diesel <input type="checkbox"/> Gas <input type="checkbox"/> Fuel Injectio</p>	
<p>Transmission Type <input type="checkbox"/> Manual <input checked="" type="checkbox"/> Automatic</p>	<p>Antilock Brakes <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p>	<p>Restraint System <input type="checkbox"/> 3-Point Belt <input type="checkbox"/> Motorbelt <input type="checkbox"/> Driverside Airbag <input type="checkbox"/> 2-Point Bel <input type="checkbox"/> Passengerside Airbag</p>		<p>Cruise Contro <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p>	<p>Drive Tral <input type="checkbox"/> Front <input type="checkbox"/> Rear <input type="checkbox"/> 4-Wheel</p>
<p>Vehicle Type <input 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 _____</p>		<p>Body Style <input type="checkbox"/> 2-Door <input type="checkbox"/> 4-Door <input type="checkbox"/> Stationwagon <input type="checkbox"/> Pick Up <input type="checkbox"/> Truck</p>			
<b>FAILED COMPONENT(S)/PART(S) INFORMATION</b>					
<p>Component <b>06400000</b></p>	<p>Part Name(s) <b>FUEL:THROTTLE LINKAGES AND CONTROL</b></p>		<p>Location <input type="checkbox"/> Left <input type="checkbox"/> Right <input type="checkbox"/> Front <input type="checkbox"/> Rear</p>		<p>Failed Part(s) <input type="checkbox"/> Original <input type="checkbox"/> Replacement</p>
<p>No of Fail ures</p>	<p>Date(s) of Failure(s) <b>28-OCT-2000</b> Mileage at Failure(s) <b>1840</b> Vehicle Speed at Failure(s) _____</p>		<p>Fail ec Part(s) <input type="checkbox"/> Yes <input type="checkbox"/> No</p>	<p>NHTSA Previously <input type="checkbox"/> Yes <input type="checkbox"/> No</p>	
<b>APPLICATION INCIDENT INFORMATION</b> (Please describe in detail the incident(s), Failure(s), Crash(es), and Injury(ies) on the back of this form)					
<p>Crash <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p>	<p>Fire <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p>	<p>Number of Persons Injured</p>	<p>Number of Fatalitie</p>	<p>Estimated Property Damag</p>	<p>Reported to Polic <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p>
<b>NARRATIVE DESCRIPTION OF FAILURE(S), INCIDENT(S), INJURY(IES)</b>					
<p><b>AT A COMPLETE STOP CONSUMER TAKES FOOT OF BRAKE TO ACCELERATE. IF AT A SLIGHT INCLINE VEHICLE WOULD ROLL BACKWARD EVEN THOUGH IT WAS IN DRIVE. DEALER SAID THAT WAS NORMAL FOR VEHICLE. *AK</b></p>					
CONTINUE ON BACK IF NEEDED					
<p>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.</p>					