
 DOT Auto Safety Hotline U.S. Department of Transportation National Highway Traffic Safety Administration		Vehicle Owner's Questionnaire (VOQ) NATIONWIDE 1-888-DASH-2-DOT 1-888-327-4236 www.nhtsa.dot.gov/hotline		FOR AGENCY USE ONLY 858 Date Received 17-JAN-2001		Od_or _____ rt_dt _____ od_rt _____ up_ltr _____	
OWNER INFORMATION (Type or Print) [Redacted] 666985				Reference No. 878322			
Signature of Owner _____				Date _____			
VEHICLE INFORMATION							
Vehicle Ident. No. (VIN.) (Located at bottom of windshield on driver's side) 4M2DV11WSDJ15039		Vehicle Make MERCURY TRUCK		Vehicle Model VILLAGER		Vehicle Year 1995	
Purchase Date <input type="checkbox"/> New <input checked="" type="checkbox"/> Used		Dealer's Name _____ City _____ State _____ Zip Code _____				Engine Size (CID/CC/L) _____ No. of Cylinders _____	
Transmission Type <input type="checkbox"/> Manual <input type="checkbox"/> Automatic		Antilock Brakes <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Restraint System <input type="checkbox"/> 3-Point Belt <input type="checkbox"/> Driverside Airbag <input type="checkbox"/> Passengerside Airbag <input type="checkbox"/> Motorbelt <input type="checkbox"/> 2-Point Belt		Cruise Control <input type="checkbox"/> Yes <input checked="" 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 checked="" type="checkbox"/> Van <input type="checkbox"/> Minivan <input type="checkbox"/> Other _____		Sport Utility 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 <input type="checkbox"/> Truck	
FAILED COMPONENT(S)/PART(S) INFORMATION							
Component 06121000		Part Name(s) FUEL:FUEL EMISSION CONTROL:LINES:VAPOR VENT				Location <input type="checkbox"/> Left <input type="checkbox"/> Front <input type="checkbox"/> Right <input type="checkbox"/> Rear	
No. of Failures		Date(s) of Failure(s) 01-DEC-2000 Mileage at Failure(s) 115 Vehicle Speed at Failure(s) _____				Failed Part(s) <input type="checkbox"/> Yes <input type="checkbox"/> No	
NHTSA Previously		<input type="checkbox"/> Yes <input type="checkbox"/> No					
APPLICATION INCIDENT INFORMATION (Please describe in detail the incident(s), Failure(s), Crash(es), and Injury(es) 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) THIS VEHICLE HAS BEEN EXPERIENCING THE SAME PROBLEM AS RECALL 00V419.002/ TANK VENT HOSE. HAD PROBLEM FIXED, BUT PROBLEM IS STILL OCCURRING. *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.							

DOT Auto Safety Hotline		FOR AGENCY USE ONLY 858	
 U.S. Department of Transportation National Highway Traffic Safety Administration		Vehicle Owner's Questionnaire (VOQ) NATIONWIDE 1-888-DASH-2-DOT 1-888-327-4236 www.nhtsa.dot.gov/hotline	
OWNER INFORMATION (Type or Print)		Date Received 17-JAN-2001	Od_ or rt_d1 od_rt up_itr
[Redacted] 666995		Reference No. 878322	
Do you authorize NHTSA to provide a copy of report to the manufacturer of your vehicle? In the absence of an authorization, NHTSA WILL NOT provide your name and address to the vehicle manufacturer.		<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO
Signature of Owner [Redacted]		Date 2/1/2001	
VEHICLE INFORMATION			
Vehicle Ident. No. (VIN) (Located at bottom of windshield or driver's side)	Vehicle Make	Vehicle Model	Vehicle Year
4M2DV11WSDJ150388	MERCURY TRUC	VILLAGER	1995
Current Odometer Reading: 104,800	Purchase Date 5/27/1997		Engine Size (CID/CC/L) 3.0
<input type="checkbox"/> New <input checked="" type="checkbox"/> Used	Dealer's Name World Lincoln Mercury City Spaldingville State GA Zip Code 30078		No. Cylinders 4
Transmission Type <input type="checkbox"/> Manual <input checked="" type="checkbox"/> Automatic	Antilock Brakes <input checked="" type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Restraint System <input type="checkbox"/> 3-Point Belt <input checked="" type="checkbox"/> Driverside Airbag <input type="checkbox"/> Passengerside Airbag <input checked="" type="checkbox"/> Motorbelt <input checked="" type="checkbox"/> 2-Point Belt	Cruise Control <input checked="" type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Drive Train <input checked="" type="checkbox"/> Front <input type="checkbox"/> Rear <input type="checkbox"/> 4-Wheel	Vehicle Type <input type="checkbox"/> Car <input checked="" type="checkbox"/> Van <input type="checkbox"/> Minivan <input type="checkbox"/> Other	<input type="checkbox"/> Sport Utility <input type="checkbox"/> Truck <input type="checkbox"/> Motorcycle	Body Style <input type="checkbox"/> 2-Door <input type="checkbox"/> 4-Door <input type="checkbox"/> Stationwagon <input checked="" type="checkbox"/> Pick Up Truck <input type="checkbox"/> Other VAN
FAILED COMPONENT(S)/PART(S) INFORMATION			
Component 06121000	Part Name(s) FUEL:FUEL EMISSION CONTROL:LINES:VAPOR VENT	Location <input type="checkbox"/> Left <input type="checkbox"/> Front <input type="checkbox"/> Right <input type="checkbox"/> Rear	Failed Part(s) <input type="checkbox"/> Original <input type="checkbox"/> Replacement
No. of Failures Cont'd.	Date(s) of Failure(s) 8-DEC-2000 3/13/2000 12/8/2000 4/5/2001 Mileage at Failure(s) 405 85,900, 102,800, 102,800 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 checked="" 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 <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 Families
Estimated Property Damage		Reported to Police <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
NARRATIVE DESCRIPTION OF FAILURE(S), INCIDENT(S), INJURY(IES)			
THIS VEHICLE HAS BEEN EXPERIENCING THE SAME PROBLEM AS RECALL 00V419.002/ TANK VENT HOSE. HAD PROBLEM FIXED, BUT PROBLEM IS STILL OCCURRING. *AK See attached service			
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.			

I'm Proud Of My...
Heritage
 LINCOLN MERCURY

SERVICE HOURS
 7:30 A.M. TO 7 P.M. MON THRU FRI
 8 A.M. TO 1 P.M. SATURDAY

1575 Scenic Highway Snellville, GA 30078 (770) 972-2277
 www.heritagelm.com

CUSTOMER NO. 15585	ADVISOR MICHAEL OVERCASH B 680	TAG NO. 774	INVOICE DATE 03/13/00	INVOICE NO. FOCS66451
[REDACTED]	LABOR RATE	LICENSE NO.	MILEAGE 88879	COLOR GREEN/SADDL
	YEAR / MAKE / MODEL 95/MERCURY/VILLAGER/WAGON	DELIVERY DATE 11/28/94	DELIVERY MILES 36597	STOCK NO.
	VEHICLE ID. NO. 4M2DV11W4SDJ16038	SELLING DEALER NO.	PRODUCTION DATE 09/19/94	
	F. T. E. NO.	P. O. NO.	R. D. DATE 03/13/00	
	COMMENTS E# 3.0L EFI			

LABOR & PARTS
 J# 1 39FDZ ENGINE EEC DIAG. HOURS: 1.00 TECH(S):682 68.50
 CUSTOMER STATES THERE IS A GAS SMELL.
 REPLACE FUEL HOSE AT GAS TANK

PARTS	QTY	FP NUMBER	DESCRIPTION	UNIT PRICE	
JOB # 1	1	F3XY-9170-C	HOS-FU/TANK VEN	20.00	20.00
				JOB # 1 TOTAL PARTS	20.00
				JOB # 1 TOTAL LABOR & PARTS	88.50

J# 2+21FOZTBELT REPLACE TIMING BELT HOURS: 4.50 TECH(S):568 584 308.25
 REPLACE TIMING BELT & DRIVE BELTS

PARTS	QTY	FP NUMBER	DESCRIPTION	UNIT PRICE	
JOB # 2	1	F4XY-6268-A	BEL-TM	39.02	39.02
JOB # 2	1	JK4-414	BEL-PWR STNG D	10.97	10.97
JOB # 2	1	JK4-473	BEL-A/C CONPR	32.35	32.35
JOB # 2	1	JK5-343	BEL-ALT	17.77	17.77
JOB # 2	1	F3XZ-8501-BA	PMP ASY-WTR	140.00	140.00
JOB # 2	8	E2FZ-19549-AA	FLUID-COOLANT	1.43	11.44
				JOB # 2 TOTAL PARTS	251.55
				JOB # 2 TOTAL LABOR & PARTS	559.80

J# 3+22FOZ-ATRAMS AUTO TRANS SERVICE HOURS: 1.00 TECH(S):587 46.00
 DRAIN AND REPLACE TRANSMISSION FLUID. REPLACE PAN GASKET.
 CLEAN FILTER SCREEN. CHECK EXTERNAL ADJUSTMENTS. ROAD TEST.

PARTS	QTY	FP NUMBER	DESCRIPTION	UNIT PRICE	
JOB # 3	6	XT-2-QDX	FLUID-AUTO TRA	1.98	11.88
				JOB # 3 TOTAL PARTS	11.88
				JOB # 3 TOTAL LABOR & PARTS	56.88

J# 4+10FOZ-CLNINJEC CLEAN INJECTORS HOURS: 1.50 TECH(S):682 56.00
 CLEAN FUEL INJECTION SYSTEM
 TECH TIME-1.5
 CLEAN INJECTORS

PARTS	QTY	FP NUMBER	DESCRIPTION	UNIT PRICE	
JOB # 4	1	PK-44	INJECTOR CLEANER	23.50	23.50
JOB # 4	1	DAY-45	MULTI PORT INJ	****	****
JOB # 4	1	DAY-44	INJ ADDITIVE	****	****
				JOB # 4 TOTAL PARTS	23.50
				JOB # 4 TOTAL LABOR & PARTS	79.50

J# 5+10FOZ AIR/FUEL SYSTEM HOURS: 0.30 TECH(S):682 20.55
 SERVIC AIR INDUCTION SYSTEM



SERVICE HOURS
7:30 A.M. TO 7 P.M. MON THRU FRI
8 A.M. TO 1 P.M. SATURDAY

1575 Scenic Highway Snellville, GA 30078 (770) 972-2277
www.heritagelm.com

CUSTOMER NO. 15585	NAME DARRYL 986	TAG NO. 235	MOYEST DATE 12/18/00	INVOICE NO. FDCSG3738
	LABOR DATE	MESSAGE NO. 102766	COLOR GREEN/SADDL	STOCK NO.
	YEAR / MAKE / MODEL 95/MERCURY/VILLAGER/WAGON		DELIVERY DATE 11/26/94	SEMIER / MILEZ 35597
	VEHICLE ID. NO. 4M20V11W4SDJ15038		DELMO DEALER NO.	PRINTED DATE 09/19/94
	F.T.E. NO.	P. O. NO.	P. O. DATE 12/18/00	
	COMMENTS E# 3.0L EFI			

LABOR & PARTS
 J# 1 45FOZ FUEL SYSTEM HOURS: 0.00 TECH(S):138 0.00
 FEUL SMELL FROM INSIDE VEH, CHECK TSB
 NO CHARGE
 JOB # 1 TOTAL LABOR & PARTS 0.00

J# 2 63FOZ ACCESSORY INSTALL. HOURS: TECH(S):138
 CUSTOMER WANT'S PRICE ON WINDOW HLDG
 NO CHARGE
 JOB # 2 TOTAL LABOR & PARTS 0.00

TOTALS
 SERVICE HOURS: MONDAY - FRIDAY 7:30AM TO 7:00PM
 SERVICE MANAGER: DARRYL JORDAN
 SERVICE ADVISORS: SANDRA FIELDS, MIKE OVERCASH
 TOTAL LABOR 0.00
 TOTAL PARTS 0.00
 TOTAL SUBLET 0.00
 TOTAL G.O.G. 0.00
 TOTAL MISC CHG. 0.00
 TOTAL MISC DISC 0.00
 TOTAL TAX 0.00
 TOTAL INVOICE \$ 0.00

FOR ALL YOUR SERVICE NEEDS PLEASE CALL
 MIKE @ 770-985-7077 EXT 123
 SANDRA @ 770-985-7077 EXT 124
 THANK YOU AGAIN FOR YOUR PATRONAGE.

CUSTOMER SIGNATURE



SERVICE HOURS
7:30 A.M. TO 7 P.M. MON THRU FRI
8 A.M. TO 1 P.M. SATURDAY

1575 Scenic Highway Snellville, GA 30078 (770) 972-2277
www.heritagelm.com

CUSTOMER NO. 15585	APPROX HIRAM 781	TAX NO. 522	INVOICE DATE 01/05/01	INVOICE NO. F0CS64069
	LABOR RATE	JOB NO.	PLATE 103779	COLOR GREEN/SADDL
	YEAR / MAKE / MODEL 95/MERCURY/VILLAGER/WAGDN	DELIVERY DATE 11/28/94	DELIVERY MILES 35597	STOCK NO.
	VEHICLE ID. NO. 4 M 2 D V 1 1 W 4 S D J 1 5 0 3 8	DELIVERY MILEAGE	PRODUCTION DATE 09/19/94	
	F. I. NO.	F. I. NO.	F. I. DATE 01/04/01	
	COMMENTS E# 3.0L EFI			

LABOR & PARTS

J# 1 45FOZ FUEL SYSTEM HOURS: 0.50 TECH(S): 737 35.88
 CUSTOMER STATES THERE IS AN ODOOR OF FUEL INSIDE VEHICLE--
 POSSIBLE FUEL LEAK
 ODOOR COMES THROUGH THE HEATER WHILE AT IDLE--MUST PRO-
 NOUNCED WHEN ENGINE IS COLD OR COOL (NOT AN EXHAUST SMELL)

JOB # 1 TOTAL LABOR & PARTS 35.88

J# 2 32FOZ-FLUID FLUID LEAK HOURS: TECH(S): 737 0.00
 CUSTOMER STATES SHE HAS A POWER STEERING FLUID LEAK
 --FLUID PUDDLES WHILE STOPPED AT IDLING--CUSTOMER STATES
 THE PUDDLE IS ABOUT 8 X 11

JOB # 2 TOTAL LABOR & PARTS 0.00

MISC. CODE DESCRIPTION CONTROL NO.
 JOB # A SS SHOP SUPPLIES/MATERIALS 1.79
 JOB # A EF ENVIRONMENTAL FEE 1.79
 TOTAL - MISC 3.58

TOTALS

SERVICE HOURS: MONDAY - FRIDAY 7:30AM TO 7:00PM	TOTAL LABOR....	35.88
SERVICE MANAGER: DARRYL JORDAN	TOTAL PARTS....	0.00
SERVICE ADVISORS: SANDRA FIELDS MIKE OVERCASH	TOTAL SUBLET....	0.00
	TOTAL G.O.G....	0.00
	TOTAL MISC CHG.	3.58
	TOTAL MISC DISC	0.00
	TOTAL TAX.....	0.11
	TOTAL INVOICE \$	39.57

FOR ALL YOUR SERVICE NEEDS PLEASE CALL
 MIKE @ 770-985-7077 EXT 123
 SANDRA @ 770-985-7077 EXT 124

THANK YOU AGAIN FOR YOUR PATRONAGE.

CUSTOMER SIGNATURE