



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

241

Date Received

23-JAN-2001

Od_or

rt_dt

pd_rt

ip_ltr

Reference No.

878806

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
1LNSM82W3WY732613	LINCOLN	TOWN CAR	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 ☐ Manual ☐ Automatic	Antilock Brakes ☒ Yes ☐ No	Restraint System ☒ 3-Point Belt ☐ Motorbelt ☐ Driverside Airbag ☐ 2-Point Belt ☐ Passengerside Airbag	Cruise Control ☐ Yes ☒ No
Drive Train ☐ Front ☐ Rear ☐ 4-Wheel	Vehicle Type ☐ Car ☐ Sport Util ☐ Van ☐ Truck ☐ Minivan ☐ Motorcycle ☐ Other _____	Body Style ☐ 2-Door ☐ 4-Door ☐ Stationwagon ☐ Pick Up Truck ☐ Other _____	

FAILED COMPONENT(S)/PART(S) INFORMATION

Component 02100000	Part Name(s) SUSPENSION:INDEPENDENT FRONT	Location ☐ Left ☐ Right ☐ Front ☐ Rear	Failed Part(s) ☐ Original ☐ Replacement
No. of Failures	Date(s) of Failure(s) 30-SEP-1998 Mileage at Failure(s) 27000 Vehicle Speed at Failure(s)	Failed Part(s) Available? ☐ Yes ☐ No	NHTSA Previously Contacted? ☐ 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 ☐ Yes ☒ No	Fire ☐ Yes ☒ No	Number of Persons Injured	Number of Fatalities	Estimated Property Damage	Reported to Police ☐ Yes ☒ No
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NARRATIVE DESCRIPTION OF FAILURE(S), INCIDENT(S), INJURY(IES)

ONGOING PROBLEM WITH VEHICLE WANDERING ACROSS ROAD, AND IT BECAME MORE SEVERE AT 70 MPH OR MORE. VEHICLE BEEN IN DEALER SHOP ON TWO OCCASIONS, AND INFORMED CONSUMER THAT NOTHING WAS WRONG. FEEL FREE TO PROVIDE ANY FURTHER DETAILS ON THIS MATTER. *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.



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 241

Date Received

01 FEB -5 AM
23-JAN-2001
OFFICE
DEFECT INVESTIGATION

Od or
rt dt
od tr
up tr

Reference No.

878806

OWNER INFORMATION (Type or Print)

668676

Work Number

Home No.

Do you authorize NHTSA to provide a copy of report to the manufacturer of your vehicle?

☐ YES☐ NO

In the absence of a signature, your name and address to the vehicle manufacturer.

Signature of Owner

Date 1/30/01

VEHICLE INFORMATION

Vehicle Ident. No. (VIN) (Located at bottom of windshield on driver's side)	Vehicle Make	Vehicle Model	Vehicle Year	Current Odometer Reading
1LNFM82W3WY732613	LINCOLN	TOWN CAR	1998	27,100
Purchase Date 9-14-98	Dealer's Name FORT MYERS HM		Engine Size (CID/CC/L)	☐ Turbo ☐ Diesel ☐ Gas ☐ Fuel Injection
☒ New ☒ Used	City FORT MYERS	State FL	Zip Code 33912	No Cylinders
Transmission Type ☐ Manual ☒ Automatic	Antilock Brakes ☒ Yes ☐ No	Restraint System ☒ 3-Point Belt ☐ Driverside Airbag ☐ Passengerside Airbag ☐ Motorbelt ☐ 2-Point Belt	Cruise Control ☒ Yes ☒ No	Drive Train ☐ Front ☒ Rear ☐ 4-Wheel
Vehicle Type ☒ Car ☐ Van ☐ Minivan ☐ Other		Body Style ☐ Sport Utl ☐ Truck ☐ Motorcycle ☐ 2-Door ☒ 4-Door ☐ Stationwagon ☐ Pick Up Truck ☐ Other		

FAILED COMPONENT(S)/PART(S) INFORMATION

Component 0210000	Part Name(s) SUSPENSION: INDEPENDENT FRONT	Location ☐ Left ☐ Front ☐ Right ☐ Rear	Failed Part(s) ☐ Original ☐ Replacement
No. of Failures	Date(s) of Failure(s) 30-SEP-1998 Mileage at Failure(s) 27000 Vehicle Speed at Failure(s)	Failed Part(s) Available? ☐ Yes ☐ No	NHTSA Previously Contacted? ☐ 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 ☐ Yes ☒ No	Fire ☐ Yes ☒ No	Number of Persons Injured	Number of Fatalities	Estimated Property Damage	Reported to Police ☐ Yes ☒ No
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EVERYBODY THAT DRIVES THE CAR - SAYE IT WEARE YOU OUT TRYING TO KEEB IN YOUR LANE, ITS DEFINITLY DANGEROUS AND A SAFETY HAZARD. ATTACHED ARE INVOICES WD9705/ C38/53 SHOW COMPLAINT AND FRONT END INSPECTION.

CONTINUE ON BACK IF NEEDED

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Fort Myers Lincoln - Mercury, Inc.



14200 South Tamiami Trail
Fort Myers, Florida 33912



SALES
DEPARTMENT
(941) 433-2277

SERVICE
DIRECT LINE
(941) 433-2300

PARTS
DIRECT LINE
(941) 433-1319

FLORIDA
TOLL FREE
(800) 228-5462

I hereby authorize the repair work to be done along with the necessary material, and hereby grant you and/or your employees permission to operate the vehicle herein described on streets, highways, or elsewhere for the purpose of testing and/or inspection. An express mechanic's lien is hereby acknowledged on below vehicle to secure the amount of repairs thereon, plus a storage fee of \$10 per day for each day the vehicle remains in our possession after the 3rd day following the completion of your work on the vehicle. The dealer is not responsible for unavailability of parts or delays in work elements beyond the dealer's control. I understand that Ft. Myers Lincoln-Mercury is not responsible against loss occasioned by theft, accident, fire, or vandalism while the property remains with the dealer. Customer states no articles of personal property have been left in the vehicle and dealer is not responsible for inspection therefor. With no other implied or expressed warranty of merchantability or fitness, I agree to pay all attorney fees for collection of bill and if suit should arise from inability to pay, attorney fees in Ft. Myers Lincoln-Mercury if they should prevail. I understand and agree that there is no guarantee on post-war look repairs. Work guaranteed 90 days or 4,000 miles.

SERVICE DEPT. HOURS

MON. - FRI.
7:30am - 5:30pm

SERVICE INSTALLED PARTS

DATE INSTALLED

MO DAY YR

ACCUSED WEAR

CAUSE TENTHS

CROSS REFERENCE TO

PROGRAM CODE(S)

REPAIR 1

REPAIR 2

REPAIR 3

MICRO REFERENCE NUMBER

Authorized Signature and Date

APPROVAL CODE OR NO.

COMMITMENT CODE

INVOICE TO

FL 33908

OWNER/OWNER INFORMATION - INVOICE: W04755

FOR OFFICE USE

TAG: 6518 ADV: 147 ARNOT, LE INVOICE: PRELIM WAR W /H
MFG: 38803/ TAX RULES: YNNN INVOICED AT: 02/18/99 15:31:30
ODOMETER IN: 3508 OUT: 3516 DIST: 1FA
DATES BEGIN: 02/18/99 DONE: 02/18/99

VEHICLE INFORMATION

VIN 1LNFM82N3M732613 LICENSE NUMBER: FL 6L539P
98 LINCOLN TOWN CAR SIGNATURE: ADR SDN IVORY
STOCK# 00081393
DATES INSERVICE: 091998 PRODUCTION: 062698 SOLD: 091498

CONCERN	CAUSE	CORRECTION	COMMENT	FACTORY	OPERATION	TECH	AMOUNT
51	CUSTOMER REPORTS CAR WONT HOLD ROAD, HANDERS	FRONT WHEELS OUT OF ALIGNMENT			3001A	001	
51-1	CASTER, CAMBER, TOE-IN - CHECK	CASTER, CAMBER AND TOE-IN - CORRECT			3001A1	001	
	CHECK AND CORRECT CASTER, CAMBER AND TOE TO SPECS						
	TECH: OUL - MATTHEW, SCOTT	CERT#: QUALITY CARE					
	CONCERN CODE: H21						
	FP-FRONT						
	REPAIR TYPE 01 VISIT 1 CODES						

INDICATORS - FRANCHISE: N

CONCERN	CAUSE	CORRECTION	COMMENT	FACTORY	OPERATION	TECH	AMOUNT
52	CUSTOMER REPORTS LIGHTS AIMED TOO HIGH	FRONT HEADLAMPS MISALIGNED			13007A	001	
	HEADLAMPS - ALIGN						
	ALIGN FRONT HEADLAMP ASSEMBLIES, RETEST, OK						
	TECH: 001 - MATTHEW, SCOTT	CERT#: QUALITY CARE					
	CONCERN CODE: L22						
	FP-13008						
	REPAIR TYPE 01 VISIT 1 CODES -						

INDICATORS - FRANCHISE: N

PAYMENT DISTRIBUTION FOR INVOICE W04755

NVD1

IF YOU HAVE ANY QUESTIONS - PLEASE SEE LEE ARNOT

PAGE 1
LAST PAGE

CUSTOMER COPY

THIS FORM PRINTED ON PREMIUM CARBONLESS RECYCLED PAPER

ON LINE SERVICE INVOICING BY FAX

TO REQUEST FORMS OR CLARIFICATIONS CALL 1-800-988-5546 EXT. 6000

Lincoln - Mercury, Inc.

14200 South Tamiami Trail
Fort Myers, Florida 33912

Mercury

Lincoln
Mercury

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SERVICE DEPT. HOURS

MON. - FRI.

7:30am - 5:30pm

SERVICE INSTALLED PARTS

DATE INSTALLED

MO DAY YR

ADDITIONAL MILEAGE

OMIT TENTHS

OR CROSS REFERENCE TO

PROGRAM CODE(S)

REPAIR 1

REPAIR 2

REPAIR 3

MICRO REFERENCE NUMBER

Authorized Signature and Date

APPROVAL CODE OR NO.

COMMITMENT CODE

INVOICE TO

FL 33908

INVOICE INFORMATION — INVOICE# C38153

FL 33908

HOME: (941) 481-3845

FOR OFFICE USE

TAG: 2308 ADV: 147 ARNDT, LE INVOICE: PRELIM CUS C NC VIN 1LNFM82W3MY732613 LICENSE NUMBER: FL GL1339F
MFG: 3BB037 TAX RULES: YY100 INVOICED: 03/13/2000 11:06:16 9B LINCOLN TOWN CAR SIGNATURE: ADR SON
ODOMETER IN: 15725 OUT: 15725 DIST: 1FA STOCK# 00081393
DATES BEGIN: 03/13/00 DONE: 03/13/00 DATES IN SERVICE: 09/1998 PRODUCTION: 062698 SOLD: 09/1998

CONCERN 01	NEEDS AROUND THE WHEEL INSPECTION	OPERATION	TECH	AMOUNT
CORRECTION	PERFORM AROUND THE WHEEL VEHICLE INSPECTION	01	001	.00
FACTORY	TECH: 001 - NATTSON, SCOTT			
TYPE: C				
TOTAL CHARGE FOR CONCERN				.00

CONCERN 06	NEEDS MOTORCRAFT FAST LUBE	OPERATION	TECH	AMOUNT
CORRECTION	PERFORM MOTORCRAFT FAST LUBE	06	001	* 12.01
COMMENT	NEEDS MOTORCRAFT FAST LUBE			
PART NUMBER	FOR NOTE DESCRIPTION QTY SELL			
FMC KIT820		FASTLUBE FL820 25QTS	19	11.94
FMC F1A2 6731 BD		FILTER ASY-OIL	1	**
016 5N30		5W30 OIL	5	**
FACTORY	TECH: 001 - NATTSON, SCOTT			
TYPE: C				
TOTAL CHARGE FOR CONCERN				24.70

CONCERN 07	NEEDS AROUND THE WHEEL TIRE INSPECTION	OPERATION	TECH	AMOUNT
CORRECTION	PERFORM AROUND THE WHEEL TIRE WEAR INSPECTION	TIRE8	001	.00
COMMENT	TREAD DEPTH 8/32 OF AN INCH			
FACTORY	TECH: 001 - NATTSON, SCOTT			
TYPE: C				
TOTAL CHARGE FOR CONCERN				.00

CONCERN 51	STEERING Wanders TO RIGHT OR LEFT HAD ALIGNED PREVIOUS DIDNT RESOLVE	OPERATION	TECH	AMOUNT
CORRECTION	PERFORM FRT END ALIGNMENT	51	001	\$ 34.95
FACTORY	TECH: 001 - NATTSON, SCOTT			
CONCERN CD: H21				

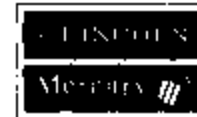
PAGE 1

CUSTOMER COPY

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SERVICE DEPT. HOURS

MON. - FRI.

7:30am - 5:30pm

SERVICE INSTALLED PARTS

DATE INSTALLED

MO DAY YR

ACCUMULATED MILEAGE

DATE TENTATIVE

GROSS REFERENCE TO

PROGRAM CODE(S)

REPAIR 1

REPAIR 2

REPAIR 3

WRCO REFERENCE NUMBER

Authorized Signature and Date

APPROVAL CODE OR NO.

COMMITMENT CODE

INVOICE TO

DRIVER/OWNER INFORMATION -- INVOICE: C38153

FOR OFFICE USE

VEHICLE INFORMATION

TAG: 2308 ADV: 147 NNDT, L INVOICED: 03/13/2000 11:06:16 MC

78 TOWN CAR

IVORY

LICENSE NUMBER: FL DL539P

TYPE: C

TOTAL CHARGE FOR CONCERN

34.95

GRAND TOTALS

SUMMARY OF CHARGES FOR INVOICE C38153

PARTS NEEDED TO REPAIR AUTO 11.94
HAZARDOUS WASTE DISPOSAL .75
LABOR TO REPAIR VEHICLE 46.96
SUB-TOTAL 59.65
STATE SALES TAX 3.53
TOTAL CHARGE 63.18

PAYMENT DISTRIBUTION FOR INVOICE C38153

TOTAL CHARGE 63.18

CASH DUE

63.18

MMOI

IF YOU HAVE ANY QUESTIONS - PLEASE SEE LEE RANDT

STATE OF FL REGISTRATION # MV 024201/FT MYERS

LINC/MERCURY-SERVICE YOU'LL FEEL GOOD ABOUT!!

OFFICE USE: CASH: 63.18 TOTAL PAID: 63.18 VISA: 03/13/00

MC: AMEX: DISC: DATE:

PAGE 2
LAST PAGE