



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** 758

Date Received

27-MAR-2001

Ord. or  
rt. dt  
pd. rt  
rp. ltr

Reference No.

884248

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>(Location at bottom of windshield or driver's side)</small>	Vehicle Make	Vehicle Model	Vehicle Year	Current Odometer Reading		
ADD	MERCEDES BENZ	C280	1998			
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 Injectio			
<input checked="" type="checkbox"/> New <input 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 checked="" type="checkbox"/> Automatic	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<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 Bel	<input checked="" type="checkbox"/> Yes <input 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 Util <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 type="checkbox"/> Other

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

Component 08100000	Part Name(s) ELECTRICAL SYSTEM: BATTERY	Location <input type="checkbox"/> Left <input type="checkbox"/> Right <input type="checkbox"/> Front <input type="checkbox"/> Rear	Failed Part's <input type="checkbox"/> Original <input type="checkbox"/> Replacement
No of Failure	Date(s) of Failure(s) 25-MAR-2001 30000 Mileage 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(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 Damag	Reported to Police <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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**NARRATIVE DESCRIPTION OF FAILURE(S), INCIDENT(S), INJURY(IES)**

WHILE DRIVING ABOUT 15 MPH, CONSUMER HEARD AN EXPLOSION, PULLED OVER AND BATTERY HAD SHATTERED. DEALER SAID IT WAS AN ELECTRICAL SHORT.\*AK

CONTINUE ON 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.



DOT Auto Safety Hotline

### Vehicle Owner's Questionnaire (VOQ)

U.S. Department of Transportation  
National Highway Traffic Safety Administration  
www.nhtsa.dot.gov/hotline  
1-888-327-4236  
NATIONWIDE 1-888-DASH-2-DOT

#### OWNER INFORMATION (Type or Print)

Work Number: [Redacted]  
Home Number: [Redacted]

Do you authorize NHTSA to provide a copy of report to the manufacturer of your vehicle?  YES  NO  
In the absence of an authorized NHTSA, you must provide your name and address to the vehicle manufacturer.

Signature of Owner: [Redacted]

Date: 8/5/01

#### VEHICLE INFORMATION

Vehicle Ident. No. (VIN) (located at bottom of windshield on driver's side):  
Vehicle Make: MERCEDES BENZ  
Vehicle Model: C280  
Vehicle Year: 1998  
Current Odometer Reading: 3

Purchase Date: 3/98  
Dealer's Name: PEP  
City/State/Zip Code: [Redacted]  
Engine Size (CID/CC/L): 6  
No. Cylinders: 6  
Turbo:   
Diesel:   
Gas:   
Fuel Injection:

Transmission Type:  Automatic  Manual  
Antilock Brakes:  Yes  No  
Restraint System:  3-Point Belt  2-Point Belt  Motorized  
Cruise Control:  Yes  No  
Drive Train:  Front  Rear  4-Wheel  
Vehicle Type:  Car  Van  Minivan  Other  
 Sport Utl.  Truck  Motorcycle  
Body Style:  2-Door  4-Door  Stationwagon  Pick Up Truck  Other

Component: 08100000  
Part Name(s): ELECTRICAL SYSTEM; BATTERY  
Location:  Right  Left  Front  Rear  
Failed Part(s):  Original  Replacement

No. of Failures: 1  
Date(s) of Failure(s): 25-MAR-2001  
Mileage at Failure(s): 30000  
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(es) on the back of this form)  
Crash:  Yes  No  
Fire:  Yes  No  
Number of Persons Injured: none  
Number of Fatalities: none  
Estimated Property Damage: none  
Reported to Police:  Yes  No

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

WHILE DRIVING ABOUT 15 MPH, CONSUMER HEARD AN EXPLOSION, PULLED OVER AND BATTERY HAD SHATTERED. DEALER SAID IT WAS AN ELECTRICAL SHORT. AK

*Has problems starting car @*

CONTINUE ON BACK IF NEEDED

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Reference No. 884248

DATE RECEIVED  
AUG 17 2001  
DEFECTS INVESTIGATION  
OFFICE  
27-MAR-2001 14