



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** §20

Date Received

19-JUN-2001

Od\_or \_\_\_\_\_  
rt\_dt \_\_\_\_\_  
pd\_rt \_\_\_\_\_  
rp\_lr \_\_\_\_\_

Reference No.

890674

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>(Locate at bottom of and/or above driver's side)</small>	Vehicle Make	Vehicle Model	Vehicle Year	Current Odometer Reading		
4M2DV11W5TDJ51032	MERCURY TRUCK	VILLAGER	1996			
Purchase Date <input checked="" type="checkbox"/> New <input type="checkbox"/> Used	Dealer's Name City _____ State _____ Zip Code _____	Engine Size (CID/CC/L) _____ No. Cylinders _____	<input type="checkbox"/> Turbo <input type="checkbox"/> Diesel <input type="checkbox"/> Gas <input type="checkbox"/> Fuel Injectio			
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"/> Motorbelt <input type="checkbox"/> Driverside Airbag <input type="checkbox"/> 2-Point Bel <input type="checkbox"/> Passengerside Airbag	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"/> Sport Util <input checked="" type="checkbox"/> Van <input type="checkbox"/> Truck <input type="checkbox"/> Minivan <input type="checkbox"/> Motorcycle <input type="checkbox"/> Other _____	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 13450000	Part Name(s) STRUCTURE:DOOR ASSEMBLY:LATCHES AND LOCKS	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) C1-JAN-1999 32000 Mileage at Failure(s)	Failed Part(s) <input type="checkbox"/> Yes <input type="checkbox"/> No	NIHTSA 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 0	Number of Fatalities 0	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)

**WHEN VEHICLE REACHES SPEEDS ABOVE 40 MPH OR TRAVELING AROUND A CORNER PASSENGER'S SIDE SLIDING DOOR WILL OPEN. DEALERSHIP HAS EXAMINED VEHICLE, AND DETERMINED THAT LOCKING MECHANISM NEEDED TO BE REPLACED. PLEASE PROVIDE ANY ADDITIONAL INFORMATION/ATTACHMENTS.\*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.



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 920

Date Received 19 JUN 2001  
OFFICE DEFECTS INVESTIGATION

Of or  
rt. dt  
od. it  
up. ltr

Reference No.  
**890674**

OWNER INFORMATION (Type or Print)

[Redacted] 7789  
Work Number  
Home Number [Redacted]

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.  
Signature of Owner [Redacted] Date 8/1/01  YES  NO

VEHICLE INFORMATION

Vehicle Ident. No. (VIN) 4M2DV11W5TDJ51032 Vehicle Make MERCURY TRUC Vehicle Model VILLAGER Vehicle Year 1996 Current Odometer Reading 33

Purchase Date SEPT 1996 Dealer's Name TERRY LINCOLN MERCURY Engine Size (CID/CC/L) \_\_\_\_\_ No. Cylinders 6  Turbo  Diesel  Gas  Fuel Injection  
 New  Used City ORLAND PARK State IL Zip Code \_\_\_\_\_

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  Sport Utl  Truck  Motorcycle Body Style  2-Door  4-Door  Stationwagon  Pick Up Truck  Other

FAILED COMPONENT(S)/PART(S) INFORMATION

Component 1345000 Part Name(s) STRUCTURE; DOOR ASSEMBLY; LATCHES AND LOCKS Location  Left  Front  Right  Rear Failed Part(s)  Original  Replacement  
No. of Failures \_\_\_\_\_ Date(s) of Failure(s) 01-JAN-1999 Mileage at Failure(s) 32000 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 0 Number of Fatalities 0 Estimated Property Damage \_\_\_\_\_ Reported to Police  Yes  No

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

WHEN VEHICLE REACHES SPEEDS ABOVE 40 MPH OR TRAVELING AROUND A CORNER PASSENGER'S SIDE SLIDING DOOR WILL OPEN. DEALERSHIP HAS EXAMINED VEHICLE, AND DETERMINED THAT LOCKING MECHANISM NEEDED TO BE REPLACED. PLEASE PROVIDE ANY ADDITIONAL INFORMATION/ATTACHMENTS. \*AK Dealer informed me they would replace lock and or examine it for a fee, I contended it is a safety issue and should be taken care of at no charge. I mention it every time I get an oil change.

CONTINUE ON BACK, IF NEEDED

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