



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 1039

Date Received

07-AUG-2001

Ord or _____
rt_dt _____
pd_rt _____
rp_lr _____

Reference No.

893747

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 and/or above windshield)</small>	Vehicle Make	Vehicle Model	Vehicle Year	Current Odometer Reading		
1MELM66LXSK647811	MERCURY	MYSTIQUE	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 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 type="checkbox"/> Yes <input checked="" 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 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 type="checkbox"/> Sport Util <input 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 05240000	Part Name(s) ENGINE COOLING SYSTEM:FAN	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) _____ 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 Polic <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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NARRATIVE DESCRIPTION OF FAILURE(S), INCIDENT(S), INJURY(IES)

COOLING FAN IS WAS UNDER RECALL#00V367000 ALSO, CERTAIN THERMAL LIMIT IN COOLING FAN RESISTOR HAD AN OPEN CIRCUIT WHICH CAUSED FAN TO SHUT DOWN, CAUSING ENGINE TO BURN.*AK

COPIED FROM NHTSA FILE # 1039

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.



Vehicle Owner's Questionnaire (VOQ)

DOT Auto Safety Hotline

U.S. Department of Transportation
National Highway Traffic Safety Administration

NATIONWIDE 1-888-DASH-2-DOT
1-888-327-4236
www.nhtsa.dot.gov/hotline

OWNER INFORMATION (Type or Print)

706176

893747

893747

REFLECTS MAIL STOP

OFFICE

01-AUG-2001

DATE RECEIVED

1039

FOR AGENCY USE ONLY

Do you authorize NHTSA to provide a copy of report to the manufacturer of your vehicle? No Yes
In the absence of an authorized signature, your name and address to the vehicle manufacturer. No Yes
Signature of Owner: _____ Date: 9/28/01

Vehicle Ident. No. (VIN) 1MELM66LXSK647811
Vehicle Make MERCURY
Vehicle Model MYSTIQUE
Vehicle Year 1995
Current Odometer Reading 40,000

Purchase Date 3/99
Dealer Name Mid Pac Auto
City, State, Zip Code Liver, KS, 66540
Engine Size (CID/CC) 10
Fuel Injection Gas Diesel Turbo

Transmission Type Automatic
Antilock Brakes Yes No
Steering System Motor/Rel 3-Point Belt 2-Point Belt
Drive Train Front Rear 4-Wheel
Vehicle Type Car Van Minivan Other
Body Style 4-Door 2-Door Stationwagon Pick Up Truck

Component 05240000
Part Name(s) Thermal Resistor
Location Left Right
Failed Part(s) Original Replacement
No of Failures 1
Date(s) of Failure(s) July 9, 2001
Mileage at Failure(s) 40,000
Vehicle Speed at Failure(s) 35 mph
NHTSA Previously 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

NARRATIVE DESCRIPTION OF FAILURE(S), INCIDENT(S), INJURY(IES)
COOLING FAN IS UNDER RECALL #00V36700 ALSO, CERTAIN THERMAL LIMIT IN COOLING FAN RESISTOR HAD AN OPEN CIRCUIT WHICH CAUSED FAN TO SHUT DOWN, CAUSING ENGINE TO BURN. AK
* purchase car through original owner, not through dealership.
Dealership repaired car and did recalls on car, since ownership in 3/99.

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CONTINUE ON BACK IF NEEDED