



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 436

Date Received

04-SEP-2001

Od. or

rt_dt

pd_rt

rp_lr

Reference No.

895685

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		
1MEL1M6539SK65964	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 05151000	Part Name(s) ENGINE COOLING SYSTEM-FAN ENGINE-TIMING GEAR AND CHAIN	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) 16-AUG-2001 122029 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 checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Number of Persons Injured 1	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)

VEHICLE CAUGHT ON FIRE IN SAME WAY AS MENTIONED IN NHTSA RECALL 00-V-367-000/
MANUFACTURER'S RECALL 00S44. CONSUMER STOPPED TO HAVE TIMING BELT REPAIRS ESTIMATED.
WHILE WALKING AWAY FROM VEHICLE CONSUMER HEARD CHIRPING, AND SMOKE WAS COMING FROM
VEHICLE. CONSUMER'S HAND WAS BURNED WHILE REACHING TO UNPLUG POWER PLUG. CONSUMER
CONTACTED MANUFACTURER ABOUT A RECALL NOT RECEIVED. MANUFACTURER WOULD NOT OFFER
REMEDY BECAUSE VEHICLE WAS OVER 100,000 MILES FOR EXTENDED WARRANTY. HOWEVER, AT TIME
WHEN RECALL WAS SENT OUT VEHICLE HAD BETWEEN 96,000-98,000 MILES. MANUFACTURER DID
ADMIT THAT RECALL NOTICE MIGHT HAVE GONE TO ANOTHER ADDRESS, BUT THEY STILL WILL NOT
COVER IT.*AK

COPIED FROM NHTSA FORM 436

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 436	
 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 01 SEP 2001 04-SEP-2001 DEFECTS IN	Od. or R. or od. or up. or Referral No. 895685
[Redacted] 712758		Work Number	Home No.
Do you authorize NHTSA to provide a copy of report to the manufacturer of your vehicle? In the absence of a signature, you are authorizing NHTSA to provide your name and address to the vehicle manufacturer.		<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO Date 09/20/2001	
SIGNATURE OF OWNER: [Redacted]			
VEHICLE INFORMATION			
Vehicle Ident. No. (VIN) (Located on bottom windshield on drivers' side)	Vehicle Make	Vehicle Model	Vehicle Year
1MEL1M6539SK65964	MERCURY	MYSTIQUE	1995
Current Odometer Reading	122405		
Purchase Date	Dealer's Name	Engine Size (CID/CC/L)	<input type="checkbox"/> Turbo <input type="checkbox"/> Diesel <input type="checkbox"/> Gas <input checked="" type="checkbox"/> Fuel Injection
<input type="checkbox"/> New <input checked="" type="checkbox"/> Used	City Tupelo State MS Zip Code 38801	No. Cylinders 4	
Transmission Type	Antilock Brakes	Restraint System	Cruise Control
<input type="checkbox"/> Man. <input checked="" type="checkbox"/> Automatic	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> 3-Point Belt <input type="checkbox"/> Motorbelt <input type="checkbox"/> Driverside Airbag <input type="checkbox"/> 2-Point Belt <input type="checkbox"/> Passengerside Airbag	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Drive Train	Vehicle Type		Body Style
<input checked="" type="checkbox"/> Front <input type="checkbox"/> Rear <input type="checkbox"/> 4-Wheel	<input checked="" 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 checked="" type="checkbox"/> 4-Door <input type="checkbox"/> Stationwagon <input type="checkbox"/> Pick Up <input type="checkbox"/> Truck
FAILED COMPONENT(S)/PART(S) INFORMATION			
Component	Part Name(s)	Location	Failed Part(s)
05240000 05151000	ENGINE COOLING SYSTEM: FAN ENGINE TIMING GEAR AND CHAIN	<input type="checkbox"/> Left <input checked="" type="checkbox"/> Front <input type="checkbox"/> Right <input type="checkbox"/> Rear	<input checked="" type="checkbox"/> Original <input type="checkbox"/> Replacement
No. of Failures	Date(s) of Failure(s)	Failed Part(s)	NHTSA Previously
	16-AUG-2001 Mileage at Failure(s) 122029 Vehicle Speed at Failure(s)	<input type="checkbox"/> Yes <input type="checkbox"/> No	<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	Fire	Number of Persons Injured	Number of Fatalities
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	1	
Estimated Property Damage	Reported to Police		
	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
NARRATIVE DESCRIPTION OF FAILURE(S), INCIDENT(S), INJURY(IES)			
VEHICLE CAUGHT ON FIRE IN SAME WAY AS MENTIONED IN NHTSA RECALL 00-V-367-000/ MANUFACTURER'S RECALL 00S44. CONSUMER STOPPED TO HAVE TIMING BELT REPAIRS ESTIMATED. WHILE WALKING AWAY FROM VEHICLE CONSUMER HEARD CHIRPING, AND SMOKE WAS COMING FROM VEHICLE. CONSUMER'S HAND WAS BURNED WHILE REACHING TO UNPLUG POWER PLUG. CONSUMER CONTACTED MANUFACTURER ABOUT RECALL NOT RECEIVED. MANUFACTURER WOULD NOT OFFER REMEDY BECAUSE VEHICLE WAS OVER 100,000 MILES FOR EXTENDED WARRANTY. HOWEVER, AT TIME WHEN RECALL WAS SENT OUT VEHICLE HAD BETWEEN 96,000-98,000 MILES. MANUFACTURER DID ADMIT THAT RECALL NOTICE MIGHT HAVE			
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.			

