



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 197**

Date Received

27-NOV-2001

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

Reference No.

899532

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 <b>MICHELIN</b>	Vehicle Model <b>M+S ALL SEASO</b>	Vehicle Year <b>1900</b>	Current Odometer Reading		
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 type="checkbox"/> Yes <input type="checkbox"/> No	Restraint System <input checked="" 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 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 checked="" type="checkbox"/> Other _____

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

Component 02700000	Part Name(s) TIRES	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 0	Dates of Failure(s) _____ Mileage at Failure(s) _____ Vehicle Speed 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 type="checkbox"/> No	Fire <input type="checkbox"/> Yes <input type="checkbox"/> No	Number of Persons Injured 0	Number of Fatalities 0	Estimated Property Damag	Reported to Police <input type="checkbox"/> Yes <input type="checkbox"/> No
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### NARRATIVE DESCRIPTION OF FAILURE(S), INCIDENT(S), INJURY(IES)

WHILE DRIVING ABOUT ANY MPH OR WHEN MAKING A TURN COULD FEEL TIRES NOT ATTACHING TO ROAD AND MAKING VEHICLE SLIP. CONSUMER TO ALMOST LOST CONTROL. CONSUMER HAD CONTACTED DEALER FOR TIRE SITUATION, BUT THEY COULD NOT FIX PROBLEM. MERCURY, GRAND MARQUIS, 2001. PLEASE PROVIDE MORE INFORMATION.\*AK

COPIED FROM NHTSA FORM 101

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.

 <p>U.S. Department of Transportation National Highway Traffic Safety Administration</p>		<p>DOT Auto Safety Hotline <b>Vehicle Owner's Questionnaire (VOQ)</b> NATIONWIDE 1-888-DASH-2-DOT 1-888-327-4236 www.nhtsa.dot.gov/hotline</p>		<p><b>FOR AGENCY USE ONLY</b> 197</p>	
<p>Date Received 02 JUN 17 2001</p>		<p>Od. Or. _____ Rt. Or. _____ od_tr _____ up_tr _____</p>		<p>Reference No. 899532</p>	
<p>27-NOV-2001 OFFICE DEFECTS INVESTIGATION</p>		<p>Work Number _____ Home Number _____</p>		<p>Signature of Owner _____ Date 3/11/02</p>	
<p>OWNER INFORMATION (Type or Relationship)</p> <p>YOUNGSTOWN OH 727770</p>		<p>Do you authorize NHTSA to contact you or your vehicle? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO In the absence of an address to the vehicle manufacturer.</p>			
<p>VEHICLE INFORMATION</p>					
<p>Vehicle Ident. No. (VIN) (Located in bottom of windshield on driver's side) 2MEFM74W81K3716</p>		<p>Vehicle Make Year Mercury Mar 2001 MICHELIN TIRES</p>		<p>Vehicle Mode M+S ALL SEASO</p>	
<p>Vehicle Year 2001</p>		<p>Current Odometer Reading 11,500</p>			
<p>Purchase Date 5/2001</p>		<p>Dealer's Name Click</p>		<p>Engine Siz. (CID/CYL) No. Cylinders 8</p>	
<p><input checked="" type="checkbox"/> New <input type="checkbox"/> Used</p>		<p>City Tucson State AZ Zip Code 85737</p>		<p><input type="checkbox"/> Turbo Diesel <input checked="" type="checkbox"/> Gas Fuel Injectio</p>	
<p>Transmission Type <input type="checkbox"/> Manual <input checked="" type="checkbox"/> Automatic</p>		<p>Antilock Brakes <input type="checkbox"/> Yes <input type="checkbox"/> No</p>		<p>Restraint System <input checked="" type="checkbox"/> 3-Point Belt <input checked="" type="checkbox"/> Driverside Airbag <input checked="" type="checkbox"/> Passengerside Airbag <input type="checkbox"/> Motorbelt <input type="checkbox"/> 2-Point Bel</p>	
<p>Cruise Control <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p>		<p>Drive Train <input type="checkbox"/> Front <input checked="" type="checkbox"/> Rear <input type="checkbox"/> 4-Wheel</p>		<p>Vehicle Type <input checked="" type="checkbox"/> Car <input type="checkbox"/> Van <input type="checkbox"/> Minivan <input type="checkbox"/> Other <input type="checkbox"/> Sport Util Truck <input type="checkbox"/> Motorcycle</p>	
<p>Body Style <input type="checkbox"/> 2-Door <input checked="" type="checkbox"/> 4-Door <input type="checkbox"/> Stationwagon <input type="checkbox"/> Pick Up <input type="checkbox"/> Truck</p>		<p>FAILED COMPONENT(S)/PART(S) INFORMATION</p>			
<p>Component 02700000</p>		<p>Part Name(s) TIRES Radial XSE MICHELIN F123AP</p>		<p>Location <input checked="" type="checkbox"/> Left front <input checked="" type="checkbox"/> Right Rear</p>	
<p>No. of Failures 03</p>		<p>Date(s) of Failure(s) 27-NOV-2001</p>		<p>Failed Part(s) <input type="checkbox"/> Yes <input type="checkbox"/> No</p>	
<p>Mileage at Failure(s) 6000</p>		<p>Vehicle Speed at Failure(s) 20</p>		<p>NHTSA Previously <input type="checkbox"/> Yes <input type="checkbox"/> No</p>	
<p>APPLICATION INCIDENT INFORMATION (Please describe in detail the incident(s), Failure(s), Crash(es), and injury(ies) on the back of this form.)</p>					
<p>Crash <input type="checkbox"/> Yes <input type="checkbox"/> No</p>		<p>Fire <input type="checkbox"/> Yes <input type="checkbox"/> No</p>		<p>Number of Persons Injured 0</p>	
<p>Number of Fatalities 0</p>		<p>Estimated Property Damage</p>		<p>Reported to Police <input type="checkbox"/> Yes <input type="checkbox"/> No</p>	
<p>NARRATIVE DESCRIPTION OF FAILURE(S), INCIDENT(S), INJURY(IES)</p>					
<p>WHILE DRIVING ABOUT ANY MPH OR WHEN MAKING A TURN COULD FEEL TIRES NOT ATTACHING TO ROAD AND MAKING VEHICLE SLIP. CONSUMER TO ALMOST LOST CONTROL. CONSUMER HAD CONTACTED DEALER FOR TIRE SITUATION, BUT THEY COULD NOT FIX PROBLEM. MERCURY, GRAND MARQUIS, 2001. PLEASE PROVIDE MORE INFORMATION.*AK</p>					
<p>CONTINUE ON BACK IF NECESSARY</p>					
<p>The Privacy Act of 1974 (Public Law 93-502): 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.</p>					



U.S. Department of Transportation  
 National Highway Traffic Safety Administration  
 Information Management Staff NSA-10.01  
 400 7th Street, SW  
 Washington, DC 20590

POSTAGE WILL BE PAID BY NATIONL HWY TRAFFIC SAFETY ADMIN.

**BUSINESS REPLY MAIL**  
 FIRST CLASS PERMIT NO. 7373 WASHINGTON, D.C.

U.S. Department of Transportation  
 National Highway Traffic Safety Administration  
 400 Seventh St., S.W.  
 Washington, D.C. 20590  
 Official Business  
 Penalty for Private Use \$300

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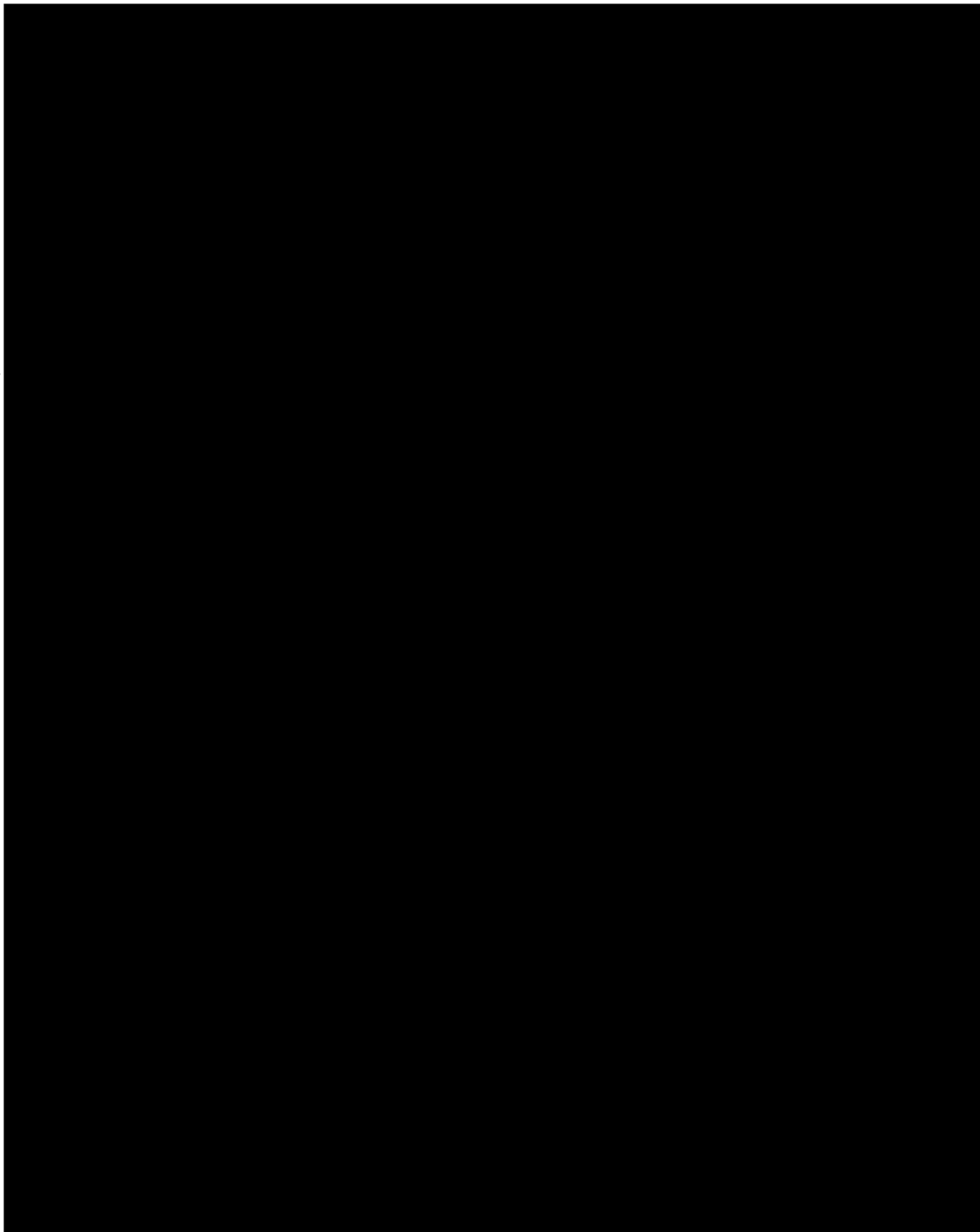
I have since 2001 I purchased a 2001 Mercury Grand Marquis. While driving on a black top road, I lost control of the car. While stopped at a traffic light, I proceeded to make a left hand turn. The car began to slide, the rear to the right & headed me in the direction to oncoming traffic. I corrected the slide & went 180° in opposite direction. I then proceeded to correct the car to the proper lane. I immediately went to the dealer who had just received the car. Checked the tires & showed me that tires had no edgetreads, but were round. no side slide could be prevented on wet pavement. At this time the tire pressure was lowered. Several later incident the same thing happened. I replaced the rear tires with snow tires. Now have three spares, afraid to put back on. Bought a big car, I thought my family & I would be safe. Didn't buy big car & expect to replace tires if this is the problem. I think the dealer or tire Co. would take some responsibility with the problem. There is a copy of 5-10-02 had the car checked again. Also had it checked on 11-01.

fold to show Return Address (no stamp needed) Fasten with tape or staple and mail

TIRE IDENTIFICATION NO. *									
D O T									
The identification number consists of 7 to 10 letters and numerals, following the letters DOT. It is usually located near the rim flange on the side opposite the whitewall or on either side of a blackwall tire.									
NARRATIVE DESCRIPTION (CONTINUED)									
INFORMATION ON TIRE FAILURE(S) (IF APPLICABLE)									
MANUFACTURER/TIRE NAME									
SIZE									

**THE FOLLOWING PAGES ARE WITHHELD TO  
PROTECT UNWARRANTED INVASION OF  
PERSONAL PRIVACY PURSUANT TO  
EXEMPTION 6 OF THE FREEDOM OF  
INFORMATION ACT (FOIA), 5 U.S.C. 552(b)(6)**

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