



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

DOT Auto Safety Hotline
Vehicle Owner's Questionnaire
To Report Vehicle Safety Defects
1-888-DASH-2-DOT
(1-888-327-4236)
INTERNET www.nhtsa.dot.gov/hotline

FOR AGENCY USE ONLY: 1368

Date Received: 2003 APR 10 AM 10:15
14-FEB-2003
Repository
Reference No. 10007417

OWNER INFORMATION (Type or Print)

Name: [Redacted]
Address: [Redacted]
City: SMYRNA State: TN Zip Code: [Redacted]

Daytime Telephone Number: [Redacted]
Evening Telephone Number: [Redacted]
E-mail Address: [Redacted]

Do you authorize NHTSA to provide a copy of this report to the manufacturer of your vehicle? YES NO
In the absence of an authorization, NHTSA WILL NOT provide your name or address to the vehicle manufacturer.
Signature of Owner: [Redacted] Date: 3/27/03

VEHICLE INFORMATION

PLEASE PROVIDE VIN: 2P4GH45R6 [Redacted]
Make: PLYMOUTH Model: VOYAGER Year: 1993
Date Purchased: 3-93 Dealer Phone Number: [Redacted]
Engine: No. Cylinders: 6 Fuel Type: Gas
Original Owner: Dealer's City: CRYSTAL LAKE State: IL Zip Code: 60014
Transmission Type: [Redacted] Antilock Brakes Cruise Control
Powertrain: [Redacted] Vehicle Component Code: 141200 AIR BAGS:FRONTAL:DRIVER SIDE INFLATOR MODULE
Multiple Failure: 1

FAILED COMPONENT(S)/PART(S) INFORMATION

Incident Date(s): 14-FEB-2003 07:07
Failure Mileage: 099600
Failure Speed: 35MPH
AIR BAG DID NOT INFLATE

ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A TIRE FAILURE

Tire Make: [Redacted] Tire Model (Name or Number): [Redacted] Tire Size (Example P215/65R15): [Redacted]
DOT No. (Example: DOTM4SABC036): [Redacted] Original Equipment Prior Repair
Failure Location: [Redacted]
Tire Component Code: [Redacted] Tire Failure Type: [Redacted]

ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A CHILD SEAT FAILURE

Make: [Redacted] Date Manufactured: [Redacted] Model No./Name: [Redacted]
Seat Type: [Redacted] Installation System: [Redacted]
Child Seat Component Code: [Redacted] Failed Part: [Redacted]

APPLICABLE INCIDENT INFORMATION:

(Please describe in detail the incident(s), failure(s), crash(es), and injury(ies).)

Crash: Yes No Fire: Yes No
Number of Persons Injured: 1 Number of Deaths: 0 Reported to Police: N

Narrative Description of Incident(s), Crash(es), and Injury(ies).
Please describe (1) events leading up to the failure, (2) failure and its consequences, and (3) what was done to correct the failure; i.e., parts repaired or replaced (and if old part is available).

CONSUMER WAS INVOLVED IN AN ACCIDENT, THE AIRBAG DEPLOYED, HOWEVER THEY DID NOT INFLATE, WHICH CAUSED INJURIES TO CONSUMER. *JB
Broken ribs, sternum & L. patella

Include, if available: Police/Fire Department Report, Photos, and Repair Invoice. ATTACH ADDITIONAL SHEETS IF NECESSARY

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.

Narrative Description of Incident(s), Failure(s), Crash(es), and Injury(ies)

After leaving residence where I worked, approx 5 blocks AUTO HAD "mind of its own" AND STEERED RT DOWN 9 SM DITCH AND INTO A CONCRETE CULVERT - AIR BAG PARTIALLY OUT WITH OUT INFLATING CAUSING STEERING wheel injury SEAT BELT AD: DID NOT HOLD: my chest or legs broke. Broken ribs, sternum & (L) patella Contusion to R knee OFF work 6 weeks slow recovery ON MAR 31 A MAN CONTACTED FROM mfg looked AT vehicle. Brain of vehicle could NOT BE gotten INTO. Creases in AIR BAG show no inflation, man SAID he'd never seen AN AIR BAG COMP OUT WITHOUT INFLATION, TOLD HIM HE HAS NOW. HAVE NOT HEARD FROM mfg SINCE HE WAS OUT.

ATTACH ADDITIONAL SHEETS IF NECESSARY

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

BUSINESS REPLY MAIL

FIRST CLASS PERMIT NO 79173 WASHINGTON, D.C.

POSTAGE WILL BE PAID BY NHTL HWY. TRAFFIC SAFETY ADMIN.

U.S. Department of Transportation
National Highway Traffic Safety Administration
Office of Defects Investigation, NVS-216
400 7th Street, SW
Washington, DC 20590

NO POSTAGE NECESSARY IF MAILED IN THE UNITED STATES

VEHICLE OWNER'S QUESTIONNAIRE

DOT AUTO SAFETY HOTLINE

TO REPORT VEHICLE SAFETY DEFECTS COMPLETE THIS FORM OR

DASH2DOT

and dial toll free at

1-888-DASH-2-DOT

1-888-327-4256

DOT Auto Safety Hotline (DASH) 2 DOT



U.S. Department of Transportation
National Highway Traffic Safety Administration
Washington, D.C. 20590
<http://www.safercar.gov>