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Form Approved OMB No. 1029-0188

**AUTO SAFETY NOTLINE**  
**Child Safety Seat Questionnaire**

NATIONWIDE 1-800-424-0800  
DC METRO AREA (202) 452-0123

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

OWNER INFORMATION (Type or Print)		Date Received		Other		
Name		Home Phone		Other		
Street No.					Apartment No.	
City <u>River</u> State <u>VA</u> Zip Code					Home Phone	
Do you authorize NHTSA to provide a copy of this information to the manufacturer of your child safety seat? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Reference No.				
In the presence of an authorized NHTSA agent, NOT provide your name and address to the vehicle manufacturer.		Date <u>3/24/03</u>				
Signature of Owner						
<b>CHILD INFORMATION</b>						
Child's Name	Age	Height	Weight			
	<u>4</u>	<u>42"</u>	<u>32 lb</u>			
<b>CHILD SAFETY SEAT INFORMATION (As identified on the label)</b>						
Manufacturer	Model Number and Name	Date Manufactured				
<u>Cosco</u>	<u>024441PK</u>	<u>5/10/2002</u>				
Seat Type: <input type="checkbox"/> Portable <input type="checkbox"/> High Back <input type="checkbox"/> Convertible <input type="checkbox"/> Booster <input type="checkbox"/> Other	Forward Facing <input checked="" type="checkbox"/> Rear Facing <input type="checkbox"/> Other	Total Poin Name (Describe when facing)				
	<u>Target</u> <u>Christiansburg VA</u>	<u>5 point harness splitter</u>				
<b>VEHICLE INFORMATION</b>						
Make of Vehicle	Model of Vehicle	Year of Vehicle				
<u>Chevrolet</u>	<u>Blazer</u>	<u>1999</u>				
<b>ACCIDENT INFORMATION (if applicable)</b>						
Accident	Number of Injured	Number of Vehicles	Police Report Filed			
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
Child Seat Location:	Facing Direction:					
<input checked="" type="checkbox"/> Front <input checked="" type="checkbox"/> Left <input type="checkbox"/> Other	<input checked="" type="checkbox"/> Forward <input type="checkbox"/> Rearward					
DESCRIBE PROBLEM/DEFECT IN DETAIL. (State method of securing child seat used)						
<u>The splitter behind the seat is not holding the straps in position. They will loosen after adjusting or when pulled firmly. This is a combination booster / 5 point harness system.</u>						
<u>CAST T081252</u>						
<u>Christiansburg VA</u>						
I hear many people complaining about the same problem described on back of instruction.						

2003 JUN 12 PM 7:31

\* \* \* COMMUNICATION RESULT REPORT ( APR. 1, 2003 3:46PM ) \* \* \*

TTI NHTSA/OFC DEFECTS INV

FILE MODE	OPTION	ADDRESS (GROUP)	RESULT	PAGE
536 MEMORY TX		912484353545	OK	P. 4/4

## REASON FOR ERROR

E-1) HANG UP OR LINE FAIL  
E-3) NO ANSWER

E-2) BUSY

E-4) NO FACSIMILE CONNECTION



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

## ODI RESUME

INVESTIGATION: PE02-046

Date Opened: 05 June 2002

Date Upgraded: 12/6/02

SUBJECT: Overheating Front and Rear Brake Components

PROMPTED BY: Owner Complaint

PRINCIPAL ENGINEER: Sonny Murianka *SM*

MANUFACTURER: Robert Bosch Corporation

MODELS: All models equipped with the Bosch Zero Offset Pin Slide (ZOPS) Disc Brake Caliper Brake System.

MODEL YEARS: 1998-2002 VEHICLE POPULATION: Approximately 150,000 Vehicles

PROBLEM DESCRIPTION: Allegation of front and rear brake components overheating, caliper lockups, smoke, and/or wheel fires.

### FAILURE REPORT SUMMARY (BOSCH ONLY)

	ODI	MANUFACTURER	TOTAL
COMPLAINTS:	1 (Dup)	92	92
CRASHES:	0	0	0
FIRES:	1	9*	10
# INJURIES:	0	0	0
FAT CRASHES:	0	0	0
WARRANTY CLAIMS:	0	136	136

Fire events reported to Bosch are a subset of Bosch complaints. These events do not include fire events reported by final stage manufacturers.

ACTION: The Preliminary Evaluation has been upgraded to an Engineering Analysis.

(EA02-035)

NHTSA ODI - Consumer Complaint

110 *6.1.04*

*143277  
728847  
726108*

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### Office of Defects Investigation

#### VOQ Confirmation

Your Complaint Information is successfully submitted.

Your Confirmation number (ODI Number) is: 10010758

#### Your Complaint Information

##### Consumer Information

Name : [REDACTED]

Org. Name : [REDACTED]

Address : [REDACTED]

City, State, Zip : Madison, CT [REDACTED]  
USA

Daytime Phone : [REDACTED]

Ext : [REDACTED]

Evening Phone : [REDACTED]

Fax : [REDACTED]

Email : [REDACTED]

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##### Complaint Information

Description : Visor on driver side broke while driver was attempting to put it down to block the sun. When it broke, it dangled in front of the driver and blocked the driver's vision of the road. Fortunately, the driver was able to grab the visor and hold it out of the way and regain sight of the road before causing an accident. The supporting metal arm separated at the point where the wire for the mirror light exits the arm. It would appear that there was a defect in the design and the casting.

Incident Date : 3/17/2003

Fire : No

Num. Fatalities : 0

Crash : No

Num. Failures : 1

Property Damage : No

Num. Injured : 0

Police Report : No

Referral Source : NHTSA

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##### Vehicle Information

*JHMRA3868WC000879*

VIN : [REDACTED]

Purchase Date : 1/22/1998

Year, Make and Model : 1998/HONDA/ODYSSEY

Original Owner : Yes

# of Cylinders : 4

Trans. Type : AUTOMATIC

Engine Size : [REDACTED]

VehicleDetails Usage : [REDACTED]

*JH MRA 3868WC 000879*