



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 100161

Date Received

Repository

12-2003 AUG 15

Reference No.
10022914

OWNER INFORMATION (Type or Print)

Name

Address

City ELKTON

State MD

Zip Code

Daytime Telephone Number

E-mail Address

Evening Telephone Number

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 _____ Date 8/15/03

VEHICLE INFORMATION

17 digit Vehicle Identification Number located in bottom left corner of dashboard

Make UNKNOWN

Model UNKNOWN

Model Year 9999

CHEV

CAVALIER

1996

Date Purchased

Dealer's Name and Telephone Number

Engine:

Fuel Type:

No: Cylinders

Original Owner

Dealer's City

State

Zip Code

Transmission Type

Antilock Brakes

Powertrain

Vehicle Component Code

50000 CHILD SEAT

Auto

Cruise Control

Multiple Failure: 1

FAILED COMPONENT(S)/PART(S) INFORMATION

Incident Date(s)

Failure Mileage

Failure Speed

11-JUN-2003

ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A TIRE FAILURE

Tire Make

Tire Model (Name or Number)

Tire Size (Example P215/65R15)

DOT No. (Example: DOTM19ABC036)

Original Equipment
 Prior Repair

Failure Location:

Tire Component Code

Tire Failure Type

ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A CHILD SEAT FAILURE

Make: COSCO

Date Manufactured: 29-JUL-1999

Model No./Name: CHILD SAFETY SEAT

Seat Type: CONVERTIBLE

Installation System

Child Seat Component Code: 570000

Failed Part: CHILD SEAT:SHIELD ASSEMBLY

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

Number of Deaths

Reported to Police

0

0

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).

COSCO EDDIE BAUER MODEL# 02870EBG. RIGHT ARM BROKE AND THE SHIELD OF CHILD SEAT. *AK

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)

RT 2 YR OLD INTO SEAT, PULLED ARM DOWN TO SNAP BETWEEN LEGS AND
ARM BROKE. LAP/FRONT SHIELD ACROSS CHILD HANGING BY LEFT ARM.
CALLED US DOT & MANUFACTURER. MANUFACTURER CLAIMS NOT A
SAFETY DEFECT (CALLED JUNE 12, 2003) AND WILL SEND APPROPRIATE
PARTS TO CVL.

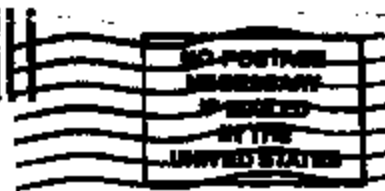
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US Department
of Transportation

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 73173 WASHINGTON, D.C.

POSTAGE WILL BE PAID BY NATION. 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 20580



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QUESTIONNAIRE**

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and dial toll free at

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(DASH) & DOT



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Administration
http://www.safercar.gov