



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

2003 OCT -1 PM 10:52
30 JUN 2003

FOR AGENCY USE ONLY 100145

Date Received

Repository

Reference No.
10026185

OWNER INFORMATION (Type or Print)

Name

Address

City DALLAS

State TX

Zip Code

Daytime Telephone Number

Evening Telephone Number

E-mail Address

Mrs. A. G. B. S. J. @ AOL.com

Do you authorize NHTSA to provide a copy of this report to the manufacturer of your vehicle? YES NO
In the absence of a signature, we will NOT provide your name or address to the vehicle manufacturer.
Signature of Owner _____ Date 7/30/03

VEHICLE INFORMATION

Make
CHEVROLET

Model
PRIZM

Model Year
2001

Date Purchased
4-17-02

Dealer's Name and Telephone Number
Taddy Nissan

Engine
No: Cylinders

Fuel Type:

Original Owner

Dealer's City
Mesquite, Texas

State TX

Zip Code 75150

Transmission Type

Antilock Brakes

Powertrain

Cruise Control

Vehicle Component Code

15100 SEAT BELTS:FRONT:RETRACTOR

Multiple Failure: 1

FAILED COMPONENT(S)/PART(S) INFORMATION

Incident Date(s)
19-APR-2003

Failure Mileage
36000

Failure Speed

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: D0THAL5ABC036)

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: 2-19-00 Model No./Name: 02-019-WHL

Seat Type:

Installation System:

Child Seat Component Code: 1026 Failed Part:

APPLICABLE INCIDENT INFORMATION

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

Crash

Fire

Number of Persons Injured

Number of Deaths

Reported to Police

Yes No

Yes No

3

0

NO

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 (e.g., parts repaired or replaced (and if old part is available)).

WHILE DRIVING AT 50 MPH VEHICLE WAS INVOLVED IN A COLLISION, AIRBAGS DID NOT DEPLOY AND SEATBELTS DID NOT RESTRAIN THE CONSUMER. AS A RESULT CONSUMER WENT THROUGH THE WINDSHIELD. DEALER NOTIFIED. *AK

10 year old son, 2 yr old in car seat was injured...

Frontal collision -

(3) car was total Not been towed..

Include, if available: Police/Fire Department Report, Photos, and Receipt Invoices.

ATTACH ADDITIONAL SHEETS IF NECESSARY

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.

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

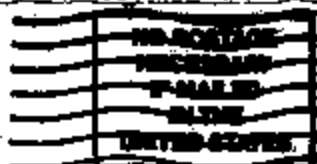
My 17 year son was Am off the Road By Trust... while trying to avoid accident
He lost control on a Rainy Day. (Vehicle had been under suspension of pre-
vious wreck, car was giving signs that it had been wrecked call Troopoy NISSAN
and acquired the Car History, as a result... My Son CRASH INTO A Cement
Block. FRONTAL COLLISION. The SEAT BELTS DIDNT WORK, NOR
DID THE AIR BAG(S). My SON 17 yrs old HIT HIS HEAD
CRACKED HIS FRONT TOOTH My 10 year was in his seat belt
BUT SUFFER NEXT DAY BACK NECK, LEGS and slept ALL DAY.
2 year old Daughter was in Infant/Toddler Car seat and
WIT FORE HEAD. Had Bruises + Pictures of this she also smud-
ged: Head, leg (Hopping Next Day) Back Hurt she two!

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 NATL. 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



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COMPLETE THIS FORM

OR

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and dial toll free at

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(DASH) 2 DOT



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