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 252

Date Received: 2003 AUG -1 PM 2:07 01-JUL-2003

Repository ☐

Reference No. 10026351

OWNER INFORMATION (Type or Print)

Name [redacted]

Address [redacted]

City WAIANAE | State HI | Zip Code [redacted]

Daytime Telephone Number [redacted]

Evening Telephone Number

E-mail Address

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 7/15/03

VEHICLE INFORMATION

[redacted]

Make: [redacted] PLYMOUTH

Model: [redacted] NEON

Model Year: [redacted] 2001

Date Purchased

Dealer's Name and Telephone Number: Budget Car Sales (808) 836-1707

Original Owner ☐

Dealer's City: Honolulu | State: HI | Zip Code: 96819

Engine: No. Cylinders

Fuel Type:

Transmission Type: Automatic

☐ Antilock Brakes
☐ Cruise Control

Powertrain

Vehicle Component Code: [redacted] Air Bag

Multiple Failure: 1

FAILED COMPONENT(S)/PART(S) INFORMATION

Incident Date(s)	Failure Mileage	Failure Speed
[redacted] 06/05/03	60,000	35MPH

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: DOTM4L9ABC036) | ☐ Original Equipment ☐ Prior Repair | Failure Location:

Tire Component Code | Tire Failure Type

ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A CHILD SEAT FAILURE

Make: | Date Manufactured: | Model No./Name:

Seat Type: | Installation System:

Child Seat Component Code: | Failed Part:

APPLICABLE INCIDENT INFORMATION

(Please describe in detail the incident(s), Fire(s), Crash(es), and Injury(ies).)

Crash	Fire	Number of Persons Injured	Number of Deaths	Reported to Police
☐ Yes ☒ No	☐ Yes ☒ No			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).

[redacted]

While driving at around 35mph my daughter [redacted] reports that the vehicle in front of her made a quick stop and due to the road being wet (Rain) her [redacted] vehicle rear ended the other vehicle totaling the Plymouth Neon. On impact the Neons Air Bag failed to deploy causing [redacted] to hit her head on the steering wheel and she also banged both her knees.

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