



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 100079

Date Received: 2003 SEP 12 PM 2:56
24-JUL-2003
Repository
Reference No. 10030031

OWNER INFORMATION (Type or Print)

Name: [Redacted]
Address: [Redacted]
City: MIDDLETOWN State: MD Zip Code: [Redacted]

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

Do you authorize NHTSA to contact the manufacturer of your vehicle? Yes No
In the absence of an authorized name or address to the vehicle manufacturer.
Signature of Owner: [Redacted] Date: 8/13/2003

17 digit vehicle identification number (located at bottom of windshield on ODP/EP3-08) Make: CHEVROLET Model: CAMARO Model Year: 1995
2G1FP225XS2118731

Date Purchased: 10/25/1999 Dealer's Name and Telephone Number: [Redacted] Engine: No. Cylinders: 6 Fuel Type: GAS
Original Owner: [Redacted] Dealer's City: [Redacted] State: [Redacted] Zip Code: [Redacted]

Transmission Type: MAN Antilock Brakes: Cruise Control: Powertrain: KRAAL
Vehicle Component Code: 141000 AIR BAGS, FRONTAL
Multiple Failure: 1

FAILED COMPONENT(S)/PART(S) INFORMATION

Incident Date(s): 24-JUL-2003 Failure Mileage: 109279 Failure Speed: 43
ANTI-LOCK BRAKES FAILED TO PREVENT SKIDDING - AIR BAGS FAILED TO DEPLOY

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) 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: 0 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. List parts repaired or replaced (and if old part is available).

WHILE DRIVING AT 35MPH CONSUMER HAD A FRONT COLLISION. AND NEITHER OF THE AIR BAGS DEPLOYED. DEALER NOTIFIED. *AK

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

The Privacy Act of 1974 (Public Law 93-502) This information is requested pursuant to authority vested in the National Highway Traffic Safety Administration 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 a campaign to enforce 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)

WHILE TRAVELING AT 45 MPH ON INTERSTATE 287, EDISON, NJ
DURING HEAVY RAIN STORM, VEHICLE HYDRO PLANED, SPUN
AND STRUCK GUARDRAIL ON CENTER PORTION OF ROADWAY.
APPLIED BRAKES TO ATTEMPT TO GAIN CONTROL, WHILE STEERING
IN DIRECTION OF SPIN - "ANTI-LOCK BRAKES FAILED TO
HELP GAIN CONTROL"

IMPACT DID NOT CAUSE AIR BAGS TO DEPLOY
BOTH FRONT PASSENGER AND DRIVER SEAT BELTS AND WERE
NOT INJURED

ATTACH ADDITIONAL SHEETS IF NECESSARY

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



NO POSTAGE
NECESSARY
IF MAILED
IN THE
UNITED STATES

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



**VEHICLE
OWNER'S
QUESTIONNAIRE**

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TO REPORT VEHICLE SAFETY DEFECTS
COMPLETE THIS FORM
OR

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and dial toll free at

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1-888-327-4239

DOT Auto Safety Hotline
(DASH) 2 DOT



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Administration
http://www.safercar.gov