



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 2003 SEP - 2
(1-888-327-4236)
INTERNET: www.nhtsa.dot.gov/hotline

FOR AGENCY USE ONLY 252

Date Received: AM 21 Jul 2003
Repository:
Reference No.: 10031304

OWNER INFORMATION (Type or Print)

Name: [Redacted]
Address: [Redacted]
City: MAITLAND State: FL Zip Code: [Redacted]

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

Do you authorize NHTSA to provide a copy of this report to the manufacturer of your vehicle? YES NO
In the absence of an authorized signature to the vehicle manufacturer.
Signature of Owner: [Redacted] Date: 8/16/03

VEHICLE INFORMATION

17 digit Vehicle Identification Number Located at bottom of windshield on driver's side: *car is in repair shop - I do not have access to.*
Make: INFINITI Model: INFINITI J30 Model Year: 1998/1993
Date Purchased: 2000 Dealer's Name and Telephone Number: Rudy Callahan 707-772-1128
Original Owner: Dealer's City: Laguna Hills State: CA Zip Code: 92653
Transmission Type: Automatic Powertrain Vehicle Component Code: 141000 AIR BAGS:FRONTAL
Fuel Type: High test
Antilock Brakes: Cruise Control:
Multiple Failure: + yes - both went off.

FAILED COMPONENT(S)/PART(S) INFORMATION

Incident Date(s): 28 JUL 2003 Failure Mileage: Failure Speed: *0 -> sitting still in park!*

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: DOTM15ABC036): 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), failure(s), crash(es), and injury(ies).)

Crash: Yes No Fire: Yes No Number of Persons Injured: 1 Number of Deaths: 0 Reported to Police: # yes

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).

WHILE THE VEHICLE WAS A IN PARK AND WITHOUT PRIOR WARNING BOTH AIR BAGS DEPLOYED. *AK
My son was sitting in the car. The engine was running. It was in park. He had been there for about 5 minutes when both airbags deployed. The windshield was broken due to the dash door hitting it when the passenger side air bag deployed. My son suffered cuts, burns and contusions to his left elbow. His left eye was blackened and his eye was damaged. His hair was

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)

Injured - so he went to the ER - the next day he saw an ophthalmologist who referred him to a retina specialist who has determined that he has some permanent damage to his vision. He has been waiting for over 3 weeks now to see what the final diagnosis is and can his vision be corrected. He is a college basketball player and he has not been able to train or practice since the incident. The retina specialist wants him to be very careful not to jar or hurt the eye further.
His name is B. Monte Mitchell

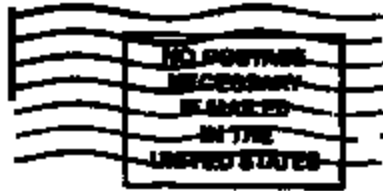
We are still waiting for a limit to repair or replace the car & pay for our serious damages. ATTACH ADDITIONAL SHEETS IF NECESSARY

U.S. Department of Transportation

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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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DOT AUTO SAFETY HOTLINE

TO REPORT VEHICLE SAFETY DEFECTS
COMPLETE THIS FORM
OR

DASH2DOT

and dial toll free at

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1-888-327-4236

DOT Auto Safety Hotline
(DASH) 2 DOT



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