



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

2004

FOR AGENCY USE ONLY 100192

Date Received
JAN 12 AM 8:58
24-NOV-2003

Repository

Reference No.
10048609

OWNER INFORMATION (Type or Print)

Name: [Redacted]
Address: [Redacted]
City: SALINAS State: CA Zip Code: [Redacted]

Daytime Telephone Number: [Redacted] 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: [Redacted] Date: 02/18/03

VEHICLE INFORMATION

17 digit Vehicle Identification Number: Located at bottom of windshield on driver's side
2GCEK19V00 [Redacted] Make: CHEVROLET Model: S10 Model Year: 1999
Date Purchased: 1999 Dealer's Name and Telephone Number: [Redacted] Engine: No: Cylinders: 8 Fuel Type:
Original Owner: Dealer's City: Salinas, CA State: CA Zip Code: 95061
Transmission Type: [Redacted] Antilock Brakes Powertrain: [Redacted] Vehicle Component Code: 141000 AIR BAGS:FRONTAL did not deployed
 Cruise Control Multiple Failure: 1

FAILED COMPONENT(S)/PART(S) INFORMATION

Incident Date(s): Nov 19 03 Failure Mileage: 49800 Failure Speed: 50

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: DOTMALSABC036): [Redacted] 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: 042 Number of Deaths: Reported to Police: Y

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).

THE VEHICLE WAS IN AN ACCIDENT AND THE AIR BAGS DID NOT DEPLOY. THE VEHICLE WAS TRAVELING AT APPROXIMATELY 50 MPH WHEN THE ACCIDENT OCCURRED. PROVIDE FURTHER DETAILS. *JB

The vehicle was traveling 50 MPH & run on the red light & hit my husband truck. this injury did not happen if air bag deployed. it look like head on accident. If air bag did not deployed & brok my husband hand.

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 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)

Dear Sir:

My brother hit left hand - 56 air bag deployed the injury did happened he suffer a lot he is still in bed. he had major surgery in salival memorial hospital with orthopedic surgeon Dr. Thomas J. Gussner

I am his wife

that is how it
sincerely

ATTACH ADDITIONAL SHEETS IF NECESSARY

U.S. 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 79173 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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OR

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and dial toll free at

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(DASH) 2 DOT



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