



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 100147

Date Received

Repository

2004 MAR -3 PM 2:44
02-FEB-2004

Reference No.
10057333

OWNER INFORMATION (Type or Print)

Name: [REDACTED]
Address: [REDACTED]
City: SAN BERNARDINO State: CA Zip Code: [REDACTED]

Daytime Telephone Number: [REDACTED]
Evening Telephone Number: [REDACTED]

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: _____ Date: 1/1

VEHICLE INFORMATION

17 digit Vehicle Identification Number Located at bottom of windshield on driver's side: FILLIN JA3AY2642W [REDACTED]
Make: MITSUBISHI Model: MIRAGE Model Year: 1996
Date Purchased: _____ Dealer's Name and Telephone Number: _____
Original Owner: Dealer's City: _____ State: _____ Zip Code: _____
Engine: No. Cylinders: 4 Fuel Type: UNLEADED
Transmission Type: AUTO Antilock Brakes Powertrain: _____
 Cruise Control Vehicle Component Code: 030000 SERVICE BRAKES, HYDRAULIC
Multiple failure: 1

FAILED COMPONENT(S)/PART(S) INFORMATION

Incident Date(s): 26-JAN-2004 Failure Mileage: 46000 Failure Speed: 25 MPH
BRAKES FAILED COULD NOT STOP VEHICLE

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: DOTM1A5ABC036) 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: 3 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).

THE VEHICLE'S BRAKES FAILED. WHEN THE BRAKE PEDAL WAS PRESSED THERE WAS A DELAY BEFORE THE BRAKES ENGAGED. THIS CONDITION CAUSED EXTENDED STOPPING DISTANCE. *NM*

Include, if available: Police/Fire Department Report, Photos, and Repair Invoice.

ATTACH ADDITIONAL SHEETS IF NECESSARY

The Privacy Act of 1974 (Public Law 93-578) 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)

VEHICLE WAS WESTBOUND ON RESIDIO AVE IN SAN CLEMENTE, CA. DRIVER APPLIED BRAKES AND VEHICLE WOULD NOT STOP. BRAKE PEDAL WENT TO FLOOR. DRIVER HIT PILLAR AT 5 P.M. AS APPOSED TO GOING INTO TRAFFIC. DRIVER AND 2 OTHER PASSENGERS WERE INJURED

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



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



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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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