Corrected Name: [redacted]

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	Repository ☐
JUN 2004 3: 45	Reference No. 10073529

OWNER INFORMATION (Type or Print)

Name [redacted]
Address [redacted]
City TUCSON | State AZ | Zip Code 85713
Telephone Number [redacted] | E-mail Address [redacted]

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 __/__/__

VEHICLE INFORMATION

17 digit Vehicle Identification Number Located at bottom of windshield on driver's side	Make	Model	Model Year
KMHDN45D63U494640	HYUNDAI	ELANTRA	2003

Date Purchased	Dealer's Name and Telephone Number			Engine: No. Cylinders	Fuel Type:
10/15/2002	4 Wm Click Automotive Team 520-884-4100			4	Gas
Original Owner ☒	Dealer's City Tucson	State AZ	Zip Code 85705		

Transmission Type		Powertrain	Vehicle Component Code
AUTOMATIC	☒ Antilock Brakes ☒ Cruise Control	FRONT WHEEL DRIVE	141000 AIR BAGS:FRONTAL Multiple Failure: 1

FAILED COMPONENT(S)/PART(S) INFORMATION

Incident Date(s)	Failure Mileage	Failure Speed
12-MAY-2004	60000	35

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: DOTMAL9ABC036)	☐ 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	Fire	Number of Persons Injured	Number of Deaths	Reported to Police
☒ Yes ☐ No	☐ Yes ☒ No	0	0	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).

WHILE DRIVING AT 35 MPH CONSUMER WAS INVOLVED IN A FRONT END COLLISION. UPON IMPACT, AIR BAGS DID NOT DEPLOY. ALSO, NO AIR BAG WARNING LIGHT APPEARED PRIOR TO THE CRASH. DRIVER WORE A SEAT BELT. *AK

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

ADOT USE ONLY

REPORT ID

1	POLICE ONLY - FORWARD COPY TO ADOT TRAFFIC RECORDS SECTION 064R 206 S. 17th AVE., PHOENIX, ARIZONA 85007-3233	YEAR 04	MONTH 05	DAY 10	HOUR 1743	NCIC NO. 1003	OFFICER'S ID NO. 40350	Agency Report Number 0405100772

Total No. of Sheets

COMPLETE THE FOLLOWING SUPPLEMENT IF ANY OF THESE BOXES ARE CHECKED

2	Total Units 3	Total Injuries 1	Total Fatalities 0	Estimated Total Damage Compared to Limit: [X] Over [ ] Under	Hwy [ ] Hit/Run	[ ] Govt. Prop.	District or Grid No.

3 LOCATION

On Highway/Road/Street: SILVERBELL

[X] Inside [ ] Outside City: Tucson — County: PIMA

Intersecting Street, Road / M.P. or R.P.: [X] At [ ] From GRANT

[ ] North [ ] South [ ] East [ ] West [ ] Plus [ ] Minus — Distance — [ ] Measured [ ] Approximate — [ ] Miles [ ] Feet

4 TRAFFIC UNIT NO.

Unit 1

State AZ — Class D — End. — — [redacted] — [ ] Other [ ] Pedestrian [ ] Pedalcyclist [redacted] — Sex M — Inj 1

Restrictions A — Date of Birth 05/27/78 — [redacted] — State AZ — [redacted]

[redacted] — State AZ — Year 10XX — [ ] Other — [redacted] — Address 1312 W ... Tuc.

Body Style 40 — Make TOYOTA — Color WHT — Year 03 — VIN 5MCAN45163... — Safety Device Code 3

Removed to — [ ] Disabled [X] Not Disabled — Removed by — Orders of

Posted Speed Limit 40 — O/e Est Speed 35

Insurance Company: State Farm ... — [redacted] — Policy [redacted]

Eff Date/Exp Date

Trailer (Other Unit) Plate No. — State — — Year — — Description of Trailer or Other Unit — Hazmat Placard? [ ] No 4-Digit 1-Digit — Was Hazmat Cargo Released? [ ] Yes [ ] No

Unit 2

State AZ — Class D — End. — — [redacted] — [ ] Other [ ] Pedestrian [ ] Pedalcyclist [redacted] — Sex F — Inj 3

Restrictions — — Date of Birth 07/13/58 — [redacted] — City Tucson — State AZ — [redacted]

[redacted] — AZ — [X] Other — Address — City — State — Zip Code

Body Style 40 — Make CHEV — Color GREEN — Year 96 — VIN 1Y1SK5289TZ047977 — Safety Device Code 3

Removed to R/O — [X] Disabled [ ] Not Disabled — Removed by R/O — Orders of R/O

Posted Speed Limit 40 — O/e Est Speed

Insurance Company: HARTFORD AUTO INS — [redacted] — [redacted]

Eff Date/Exp Date 10/12/03 10/12/04

Trailer (Other Unit) Plate No. — — State — Year — Description of Trailer or Other Unit — Hazmat Placard? [ ] No 4-Digit 1-Digit — Was Hazmat Cargo Released? [ ] Yes [ ] No

Unit 3

State AZ — Class D — End. — — [redacted] — [ ] Other [ ] Pedestrian [ ] Pedalcyclist [redacted] — Sex F — Inj 1

Restrictions — — Date of Birth 12/... — [redacted] — City Tucson — State AZ — [redacted]

[redacted] — State AZ — Year 05/05 — [ ] Other — Address — City — State — Zip Code

Body Style 40 — Make PONT — Color GRY — Year 97 — VIN 1G2JB5473V7575270 — Safety Device Code 1

Removed to — [ ] Disabled [ ] Not Disabled — Removed by — Orders of

Posted Speed Limit 40 — O/e Est Speed 10

Insurance Company: GEICO — [redacted] — [redacted]

Eff Date/Exp Date 05/10/03 05/10/04

Trailer (Other Unit) Plate No. — State — Year — Description of Trailer or Other Unit — Hazmat Placard? [ ] No 4-Digit 1-Digit — Was Hazmat Cargo Released? [ ] Yes [ ] No

5 PASSENGERS

Seating Position

07 04 01 / 08 05 02 / 09 06 03

10 Not in Passenger Compartment
11 Motorcycle, Bus
12 Other
13 Unknown
14 Pedalcyclist

Safety Devices

1 None used
2 Lap belt
3 Lap &Shoulder
4 Airbag deployed
5 Child restraint
6 Protective helmet
7 Passive belt
8 Passive & lap
9 Other
0 Unknown

Injury Severity Codes

1 - No Injury
2 - Possible Injury
3 - Non Incapacitating Injury
4 - Incapacitating Injury
5 - Fatal Injury
6 - Not Reported / Unknown

Unit #	Seat Pos	SD	Name	Address	City	State	Zip Code	Age	Sex	Inj
			N/A							

6

Other Property Damage (Describe): N/A

Owner's Name — Address — City — State — Zip Code — Telephone Number

7 WITNESSES

Name	Address	City	State	Zip Code	Telephone Number	Age
N/A						

8

Photos Taken [ ] Yes [X] No — Photographer's Name, ID Number, and Agency

Officer's Signature and ID Number: ... 40350 — Agency: TPD

Invest. at Scene [ ] Yes [ ] No — Date Invest. 05/10/04 — Time Invest.

Date Completed 05/10/04

F-2703 R08/00 (10C)

CITY OF TUCSON — PIMA COUNTY — STATE OF ARIZONA

ARIZONA TRAFFIC TICKET AND COMPLAINT

[redacted]

Case Number [redacted]

Supplement / Fit Case Status

Class: 72 — 07 — Citation 03??

Employee No. [redacted]

Last [redacted]

Social Security Num. / State of DL

Spanish Speaker

Residential Address [redacted]

City: TUCSON — AZ [redacted]

Sex: M — Height: 5'10 — Weight: 180 — Eyes: BRO — Hair: BLK — Birth Date: 06/21/76 — Restriction: N/A — Home Phone: 2751

Business Address — City — State — Zip

[redacted]

Color: WHITE — Year: 03 — Make: NISSAN — Model: ALTIMA — [redacted] — State: AZ — Expires: 10/04

Location: Military ?? Kolb ... 1 M. S. of Escalante ... — 4640

Speed 35 — 90

[redacted]

Date 05 10 04 — Time 1143 — SILVERBELL / GRANT

	Committed a:	IN VIOLATION OF			
A	Civil Traffic [X] / Criminal Traffic / Civil Infraction / Criminal / Petty Offense	28-701(A) — As Follows: FAILURE TO CONTROL SPEED TO AVOID AN ACCIDENT	ARS [X]	City Code	County Ordinance / Domestic Violence
B	Civil Traffic / Criminal Traffic / Civil Infraction / Criminal / Petty Offense	As Follows:	ARS	City Code	County Ordinance / Domestic Violence
C	Civil Traffic / Criminal Traffic / Civil Infraction / Criminal / Petty Offense	As Follows:	ARS	City Code	County Ordinance / Domestic Violence
D	Civil Traffic / Criminal Traffic / Civil Infraction / Criminal / Petty Offense	As Follows:	ARS	City Code	County Ordinance / Domestic Violence
E	Civil Traffic / Criminal Traffic / Civil Infraction / Criminal / Petty Offense	As Follows:	ARS	City Code	County Ordinance / Domestic Violence

You must appear: CITY COURT [X] — JUSTICE COURT — COUNTY JUSTICE COURT — CITY COURT CIVIL INFRACTION — VICTIM: YES [X] NO — VICTIM RIGHTS: N/A [X] REQUESTED / WAIVED / EXCEPTION

Your Court Date: 05/20/04 — Time: 8:30 AM

JUVENILE REFERRAL: Your parent/guardian will be contacted by the juvenile court concerning the above offense(s).

Parent/Guardian — Address — Phone

Criminal [ ] Without admitting guilt, I promise to appear as directed in this complaint.

Civil [X] Without admitting responsibility, I acknowledge receipt of this complaint.

I certify that, upon reasonable grounds, I believe that defendant committed the above act(s) described, contrary to law, and have served a copy of this complaint upon the defendant.

X [redacted] — Signature

ESCOBAR #4035? — 5/11

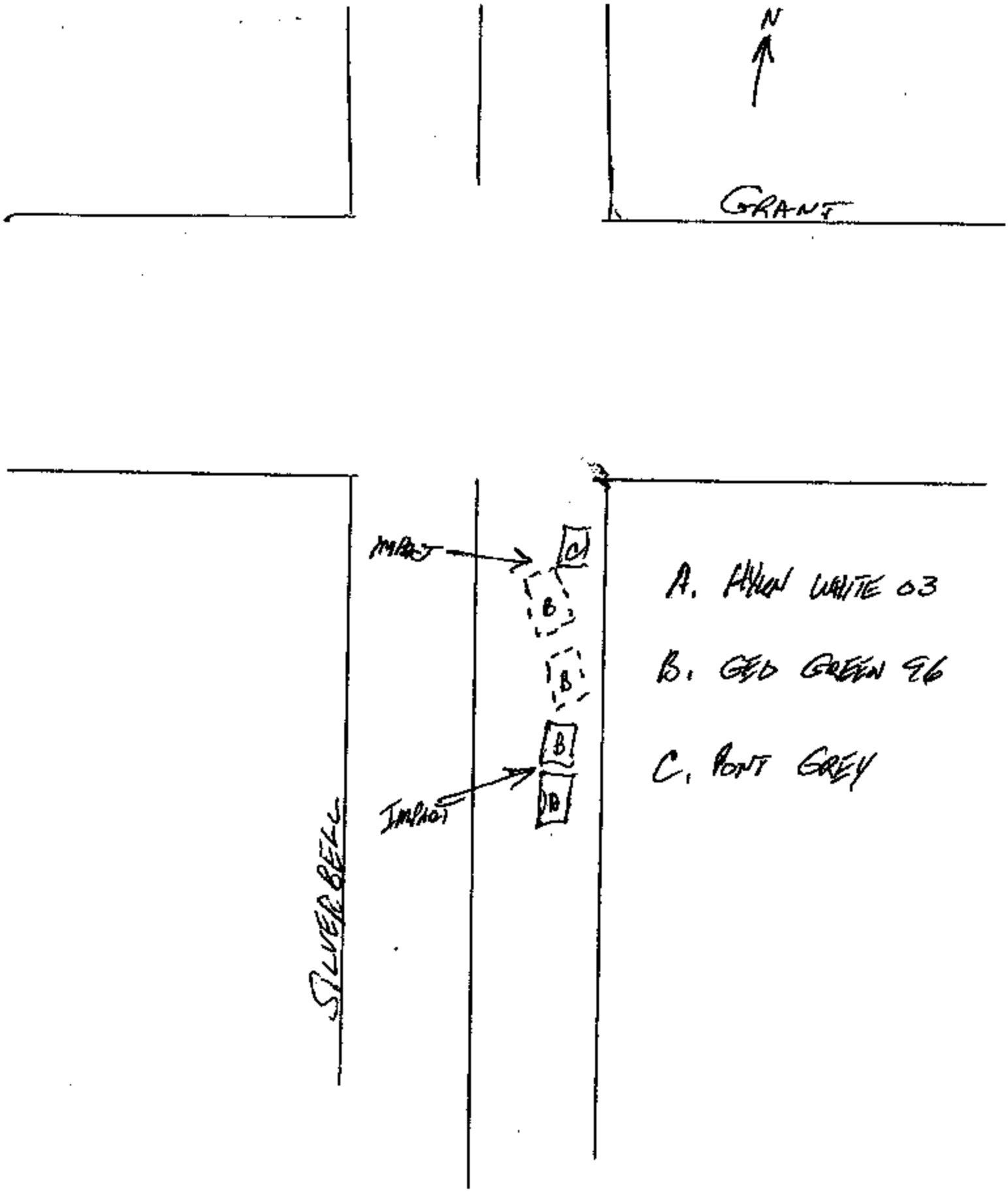
Complainant — PR# — Div/Date

HANKIN SECURITY
VEHICLE ACCIDENT #4

Day MONDAY
Date 5/10/04
Acct
Officer VAN HOFF

AT APPROX 5:30 PM 5/10/04 I WAS APPROACHING GRANT ROAD GOING NORTHBOUND ON SILVERBELL AT 35 MPH OR LESS. NOTICED THE GREEN CAR IN FRONT OF ME HAD BRAKE THREE CAR LENGTHS BETWEEN HER CAR AND THE CAR IN FRONT OF HER. I ASSUMED SHE WOULD DRIVE UP BEHIND THAT CAR. AT THAT TIME THE CELL PHONE RANG. AS I REACHED DOWN ON THE CONSOLE TO GET THE PHONE, THE GREEN CAR STOPPED. ALTHOUGH I APPLIED THE BRAKES I HAD ADEQUATE TIME TO STOP. THE AIR BAG DID NOT DEPLOY. AT THIS TIME, THE GREEN CAR PROCEEDED ANOTHER 2 OR 3 FEET BY MY ESTIMATE, WHERE IT STRUCK A GREY BENTLEY. AT THE SCENE IT WAS SAID THERE WERE NO INJURIES. PARAMEDICS CALLED AND AMBULANCE FOR THE DRIVER OF THE GREEN CAR. PARAMEDIC SAID WOMAN WAS COMPLAINING OF NECK INJURY. TRANSPORTED TO HOSPITAL.

[redacted]


N
GRANT
SILVER BELL
MAIN
INDIAN
C
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A. HAAN WHITE 03
B. GED GREEN 96
C. PONT GREY