



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 100222

Date Received: 30-JUL-2004
Repository: 10083862

OWNER INFORMATION (Type or Print)

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

Daytime Telephone Number: [Redacted] E-mail Address: [Redacted]
Evening Telephone Number: [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 authorized signature, your name or address to the vehicle manufacturer.
Signature of Owner: [Redacted] Date: 9/17/04

VEHICLE INFORMATION

17 digit Vehicle Identification Number Located at bottom of windshield on driver's side: 1YVGF22C4W5 [Redacted]
Make: MAZDA Model: 626 Model Year: 1998
Date Purchased: 7/29/98 Dealer's Name and Telephone Number: John Koo's Mazda, 301-423-2200 Engine: No. Cylinders: 4 Fuel Type: Gas
Original Owner: Dealer's City: Marlow Heights State: MD Zip Code: 20746
Transmission Type: AUTOMATIC Antilock Brakes Powertrain: FRONT WHEEL DRIVE Vehicle Component Code: 061110 ENGINE AND ENGINE COOLING;ENGINE;GASOLINE;BELTS AP
 Cruise Control Multiple Failure: 1

FAILED COMPONENT(S)/PART(S) INFORMATION

Incident Date(s): 10-JUL-2004 Failure Mileage: 97500 Failure Speed: 20 mph

ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A TIRE FAILURE

Tire Make: [Redacted] Tire Model (Name or Number): [Redacted] Tire Size (Example P215/65R16): [Redacted]
DOT No. (Example: DOTM19ABC038) 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: [Redacted] Number of Deaths: [Redacted] 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; i.e. parts repaired or replaced (and if old part is available).

TIMING BELT TENSION FAILED, RESULTING IN VEHICLE STALLING IN THE MIDDLE OF THE ROAD. MANUFACTURER STATED THAT VEHICLE WAS NOT INCLUDED IN THE PREVIOUS RECALL DUE TO VIN. *AK

Had car towed to Mazda dealership.

Had to replace timing belt tensioner (which failed) & timing belt that was destroyed as a result of the failure. No injuries due to location of failure. slowing down to make a right into a parking lot.

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.

**THE ATTACHMENTS TO THIS
DOCUMENT HAVE BEEN REMOVED
TO PROTECT UNWARRANTED
INVASION OF PERSONAL PRIVACY
PURSUANT TO EXEMPTION 6 OF
THE FREEDOM OF INFORMATION
ACT (FOIA), 5 U.S.C. 552(b)(6).**