



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 100148

Date Received

Repository ☐

2007 OCT 22 AM 10:50
01-OCT-2007

Reference No.

10204518

OWNER INFORMATION (Type or Print)

Name

Address

City

HASTINGS

State

MI

Zip Code

Daytime Telephone Number

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 a signature, your name or address to the vehicle manufacturer.

Signature of Owner

Date 10/15/07

VEHICLE INFORMATION

17 digit Vehicle Identification Number Located at bottom of windshield on driver's side

KMHDN45D4

Make

HYUNDAI

Model

ELANTRA

Model Year

2001

Date Purchased
01-AUG-01

Dealer's Name and Telephone Number

Fox Hyundai

616 942 5000

Engine:

No: Cylinders 4

Fuel Type:

Gas

Original Owner

☒

Dealer's City

Grand Rapids

State

Mich

Zip Code

49512

Transmission Type

MANUAL

☐ Antilock Brakes

☒ Cruise Control

Powertrain

FRONT WHEEL DRIVE

Vehicle Component Code

141000 AIR BAGS:FRONTAL

Multiple Failure: 1

FAILED COMPONENT(S)/PART(S) INFORMATION

Incident Date(s)

21-JUN-2007

Failure Mileage

62000

Failure Speed

50

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: DOTM19ABC036)

☐ 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

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).

TL*THE CONTACT OWNS A 2001 HYUNDAI ELANTRA. WHILE DRIVING 50 MPH, THE CONTACT WAS FORCED OFF THE ROAD AND CRASHED INTO A STEEL PIPE. THE AIR BAGS FAILED TO DEPLOY AND THE SEAT BELTS FAILED TO PROPERLY RESTRAIN. THE DRIVER SUSTAINED CRACK RIBS AND BRUISES TO THE CHEST. AS OF OCTOBER 1, 2007, THE DEALER AND MANUFACTURER HAD NOT INSPECTED THE VEHICLE. THE VEHICLE WAS DESTROYED. A POLICE REPORT WAS FILED. THE CURRENT AND FAILURE MILEAGES WERE 62,000.

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)

please refer to enclosed information
note that the shoulder harness did not engaged either

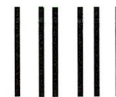
ATTACH ADDITIONAL SHEETS IF NECESSARY

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



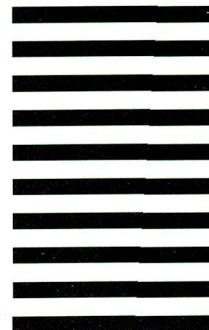
NO POSTAGE
NECESSARY
IF MAILED
IN THE
UNITED STATES

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-210
400 7th Street, SW
Washington, DC 20590



**Think your vehicle
has a safety defect?**



If so:

**Use the enclosed
form to file a report.**

or visit:

www.safercar.gov

or call:

**Vehicle Safety Hotline
888-327-4236**



Vehicle Owner's Questionnaire (VOQ)
U.S. Department of Transportation
National Highway Traffic Safety Administration



[REDACTED]
Hastings, MI [REDACTED]

Phone [REDACTED]

October 16, 2007

National Highway Traffic Safety Administration
Office of Defects Investigation, NVS-210
400 7th Street SW
Washington, DC 20590

RE: Reference No [REDACTED]

Please find enclosed information pertaining to the report I placed to the Vehicle Safety Hotline.

In a nutshell I was involved in a vehicle accident on June 21, 2007 where I was "run off" the road striking a metal culvert at approximately 50 mph. The airbag did not deploy and the shoulder harness did not engaged resulting in me "bouncing off" of the steering wheel.

On June 25 I contacted Hyundai simply to advise them of what happened, thinking that they might want to look at the vehicle since the safety devices did not work. As I explained to them, my injuries are relatively minor considering what could have

happened, and what could happen to someone else, so they might want to investigate.

Since that date there has been numerous correspondences between Hyundai and myself, with Hyundai making false statements pertaining to the accident, and basically denying that the problem(s) occurred.

I am still concerned that this may be a design flaw or manufacturing problem, so I am turning to you for help. Hyundai's blatant attempt to "sweep this under the rug" has further fueled my desire for someone to be aware of these potential problems.

I have enclosed copies of the following:

- A) Original response from Hyundai dated 6/29/07.
- B) My response dated 7/10/07. In an attempt to "speed things up", I tried to provide the information requested verbally, but Hyundai refused.
- C) Authorization forwarded to Secura Insurance to allow vehicle inspection. (Hyundai required me to provide, even though at this point I was no longer owner of vehicle)
- D) Hyundai's letter dated 8/24/07, which includes numerous errors, and miss-statements. This letter was in response to my 7/10 letter.
- E) My response dated 8/30/07.
- F) Hyundai's response dated 9/19/07, which considers the case, closed.
- G) I have also enclosed a copy of the Accident Report as filled out by the Michigan State Police, which shows that the air bag did not deploy.
- H) CD containing pictures that were taken of the vehicle.

If there is any other information that I can provide please
feel free to contact me at home in the evenings [REDACTED]
[REDACTED] or at work during the day [REDACTED]

Sincerely,

[REDACTED]



Hyundai Motor America

10550 Talbert Avenue, P.O. Box 20850, Fountain Valley, CA 92728-0850

TEL: 714-965-3000 FAX: 714-965-3816

WEB: HyundaiUSA.com

June 29, 2007

[REDACTED]
Hasting, MI [REDACTED]

File Number: [REDACTED]

Dear [REDACTED]

This notice is sent to you in response to your recent inquiry. To assist us in our investigation, please send the following information or documents listed below:

- A. Color photographs of your damage Hyundai, including the front end, side and rear, engine compartment, front and rear interior, vehicle Identification Number (VIN) plate, located on the top left side of the dashboard
- B. Documentation reflecting payments made to you by your insurance company.
- C. An itemized list of what you are seeking. Attach any supporting documents you have in your possession.
- D. A description of the Hyundai vehicle, including the VIN, mileage and a copy of the current registration.
- E. All reports indicating the cause of the incident.
- F. The date, location and details of the incident, including the usage of the vehicle prior to the incident.
- G. Purchase Agreement/Bill of Sale
- H. Repair/maintenance invoices in your possession.
- I. Signed Owner Authorization Request.
- J. The Hyundai file number assigned to your case.
- K. Current daytime telephone number.

Providing this information will expedite our investigation and ensure a prompt response to your inquiry. We will contact you once the documents have been received and reviewed.

If we do not receive all the information/documents requested within 30 days from the date of this letter, we will presume that you no longer wish to have Hyundai review your matter.

Please direct all correspondence to:

Hyundai National Consumer Affairs
P.O. Box 20850
Fountain Valley, CA 92728

Sincerely,

Carolyn B. Harvey
Hyundai National Consumer Affairs

Carolyn

8/1 not heard again

8/13 inspector to Secura

NO WORD
UNWARE of inspector

7/10/07

Carolyn B Harvey
Hyundai National Consumer Affairs
P.O. Box 20850
Fountain Valley, CA 92728

Ms Harvey,

Please find enclosed the information requested in
your letter dated 6/29/07.

A) Vehicle ID Number - KMHDDU45D41 [REDACTED]
A CD with pictures that my wife took of
the vehicle is enclosed

B) Documentation of the insurance company
payment of [REDACTED] in considering vehicle a
total loss

C) I am concerned that the air bag, did not
deploy, and the seat belt ~~for~~ shoulder harness
did not engage. These two factors caused me
to "bounce off" the steering wheel causing
chest and neck injuries.

D) 2001 Hyundai Elantra
KMHDR4504 [REDACTED] Vehicle ID Number
62,800 miles excellent condition
Copy of current registration enclosed

E) Michigan State Police Case # 56-[REDACTED]
Trooper Chris Haywood 1-269-792-2213
I was enroute on 135th Ave going out of
Wayland, Michigan when I noticed an on-
coming vehicle drifting into my lane. When
the other vehicle was entirely in my lane I
was forced to take evasive action. I drove
down an embankment and thought I was
going into a field. I did not realize that
there was a partially buried steel pipe
culvert. I hit the culvert going approx
50 miles per hour.

F) See above
Accident occurred 6/21/07 at approx 3:40 PM
Vehicle was used to go back and forth to work,
and used as family vehicle on occasion.

G) Copy of Bill of Sale enclosed

H) Service and maintenance record, where inadvertently disposed of after insurance settlement. However, all scheduled and required maintenance was done either by Fox Hyundai (Grand Rapids, MI) 1-800-942-0880 or Rainside Auto Service in Wayland, MI (1-269-292-1640 Scott).

I) Signed owner authorization request since Secura Insurance now owns the vehicle I have faxed request to Daniel at Secura Insurance 1-800-233-2345 ext 7208.

J) Hyundai File Number [REDACTED]

K) Daytime phone # [REDACTED] work
6:30 AM - 5:00 PM EST
home [REDACTED]

Please Advise if there is any additional
information required

Sincerely,

A large black rectangular redaction box covering the signature area.

MICHIGAN REGISTRATION

**Terri Lynn Land
Secretary of State**

Plate: [REDACTED] Expires: 11/19/2007

2001 HYUNDAI 4 DOOR

Vehicle No.: [REDACTED] Fee Cat. or Wt.: 12

County: BARRY

[REDACTED]
[REDACTED]
[REDACTED]
HASTINGS MI [REDACTED]

License Fee: [REDACTED]

10172006 [REDACTED]

400

[REDACTED]
[REDACTED]
HASTINGS, MI [REDACTED]

Phone [REDACTED] (home)

Phone: [REDACTED] (work)

Fax: [REDACTED] (work)

FACSIMILE TRANSMITTAL SHEET

To: Secura

Date: 7/11/07

Attn: Daniel

Number of pages including cover: 2

RE: _____

.....
Daniel,

would you please fill this out and fax to

Hyundai Motor American

Attn: Carolyn Harvey

FAX 714-965-3816 phone 714 965 3000

Thanky

PLEASE REPLY

FOR REVIEW

URGENT

PLEASE COMMENT

#4955

**Hyundai Motor America**

10550 Talbert Avenue, P.O. Box 20850, Fountain Valley, CA 92728-0850

TEL: 714-965-3000 FAX: 714-965-3816

WEB: HyundaiUSA.com

OWNER AUTHORIZATION REQUEST

HYUNDAI MOTOR AMERICA HAS BEEN ASKED TO INSPECT THE FOLLOWING:

Customer _____

VIN # _____

Model _____

Year _____

HMA File # _____

Vehicle Location _____

The vehicle is located in your insurance/salvage yard. Please authorize a representative from Hyundai Motor America to perform the necessary interior/exterior inspection of the vehicle. Thank you in advance for your cooperation.

Present Owner:

I _____ authorize and consent the inspection of the
[Printed Name]

following vehicle, (VIN) _____ including the retrieval of any
[Vehicle Identification Number]

electronically-stored data in the vehicle (if applicable), at our insurance/salvage yard.

[Signature]

[Date]



Hyundai Motor America

10550 Talbert Avenue, P.O. Box 20850, Fountain Valley, CA 92728-0850

TEL: 714-965-3000 FAX: 714-965-3816

WEB: HyundaiUSA.com

August 24, 2007

[REDACTED]
Hasting, MI [REDACTED]

Re: HMA File# [REDACTED]

Dear [REDACTED]

Thank you for your recent correspondence. We have thoroughly reviewed your comments and indeed regret the circumstances you have experienced.

From the information provided, your vehicle's airbag system performed as it was designed in connection with your daughter's accident. Your Elantra's frontal airbags are not intended to deploy during every impact that is generally directed against the vehicle's front end. Frontal airbags are designed to deploy when a vehicle has sustained a sufficient forward deceleration to trigger the airbag sensor. The airbag sensor reacts to extreme deceleration of the vehicle's forward movement. Based upon the information provided, after your vehicle collided with the steel pipe culvert, your vehicle continued moving forward. This type of accident involves much less severe deceleration than an impact with a fixed barrier that brings the vehicle to a complete stop. Given the nature of your accident, the frontal component to the collision simply was not sufficient to merit airbag deployment.

Indeed, the proper operation of the airbag system appears to be validated by other information you provided. The airbag system in your Elantra has a different threshold for deployment of the frontal airbags and activation of the seatbelt pretensioners. That is, the seatbelt pretensioners will be activated at a lower threshold deceleration rate than the frontal airbags. From the information you provided, in your accident, the seatbelt pretensioner on the occupied, driver's side activated. This not only prevented more substantial injuries to you, but also confirms that the airbag threshold system performed as it was designed in connection with this type of collision.

We attempted to inspect your vehicle and believed that an inspection would have confirmed the proper operation of the vehicle's airbag system. Unfortunately, however, we have been informed that the vehicle has been sold and is no longer available for inspection, its current location unknown. Accordingly, while we sympathize with you about your accident, from the information available to us, we cannot agree that the accident involved a product defect.

Carolyn
8/27 7:20 PM
Layhawn ext 54283



Hyundai Motor America

10550 Talbert Avenue, P.O. Box 20850, Fountain Valley, CA 92728-0850

TEL: 714-965-3000 FAX: 714-965-3816

WEB: HyundaiUSA.com

We do need to advise you that this is Hyundai's final decision in this matter. If you should have any other concerns that you want to discuss with us, please feel free to write or call our Consumer Assistance Center at 1 (800) 633-5151.

Sincerely,

Carolyn B. Harvey

Carolyn Harvey

National Consumer Affairs

[REDACTED]
Hastings, Michigan
Phone [REDACTED]

August 30, 2007

Carolyn B. Harvey
Hyundai National Consumer Affairs
10550 Talbert Avenue
P.O. Box 20850
Fountain Valley, CA 92728-0850

Ms. Harvey,

This letter is in response to the correspondence I received from you dated 8/24/07. When I first read the letter I could not believe it. There are so many statements that are completely false and incorrect, that I cannot stand aside and let this be "Hyundai's final decision in this matter".

First, your letter states that this was "your daughter's accident". I do have a daughter, but she is years from being able to drive. Also she was not in the vehicle at the time of the accident. Since the responding officers name, phone number, and case number was provided to Hyundai this should have been evident if the accident was investigated. So how did this become "your daughter's accident"?

Second, your letter states, "Frontal airbags are designed to deploy when a vehicle has sustained a sufficient forward deceleration to trigger the airbag sensor. The airbag sensor reacts to extreme deceleration of the vehicle's forward movement." I would think that going from 50 mph to 0 instantly would classify as "extreme

deceleration". Your letter also states "your vehicle continued moving forward". Where in the world did you get this information?

My letter to you dated 7/10 does not say that, and neither does the police report. When my vehicle hit the culvert it stopped dead, it did not travel on the culvert, above the culvert, or over the culvert. How can you say, "based upon the information provided", when the information provided is completely contrary to what you state in your letter?

Third, your letter states, "From the information you provided, in your accident, the seatbelt pretensioner on the occupied, driver's side activated". This again is completely false. As stated in my letter to you the seatbelt shoulder harness did **not** engage.

The combination of the air bags **not** deploying and the seat belt harness **not** engaging allowed me to "bounce" off of the steering wheel striking my chest and shoulder. Hyundai's interpretation of the facts in saying that these systems operated as designed, is opposite of what actually happened.

Fourth, your letter states that you attempted to inspect the vehicle, and that it has been sold and is no longer available for inspection.

When I first contacted Hyundai on 6/25 I expressed my concern to Linda that Hyundai might want to inspect the vehicle. (Linda did send me a packet containing info on the air bag and restraint systems. After thoroughly reading the material my wife and I agreed that the air bags should have deployed, and that the shoulder harness should have engaged) I again expressed the urgency when I spoke with you on 7/9 or 7/10 after receiving your letter dated 6/29/07, which I did not receive until 7/7. I told you that the insurance company had decided to total the vehicle, and tried to give you verbally the majority of the 11 items requested in your 6/29 letter in an attempt to expedite the process.

You informed me that I would have to submit the information in writing before anything could begin. (at this point we have already lost 2 weeks). I sent the information to you (another copy enclosed), along with a cd containing pictures that were taken of the vehicle, and accident site, on July 10.

Since Hyundai would not contact the insurance company, at my request Secura insurance forwarded to you the Owner Authorization Request on July 11 or July 12. The week of July 30 I received a call at work from a gentleman wanting to know the location of the vehicle so it could be inspected. (if the systems operated correctly, why did you want to inspect the vehicle?) I informed him that I no longer owned the vehicle, that the insurance company had considered it totaled, but that to my knowledge it was still locally available for inspection and gave him Securas contact and phone number. (what happened in the 2 weeks time between July 12 and the week of July 30?)

Per Secura Insurance the vehicle was in fact sold on August 12, 2007. It seems to me that somewhere in the overall time span of 1-1/2 months there was time for the vehicle to be inspected.

I had been very impressed with the Elantra as to quality and reliability. In fact I was going to be replacing the vehicle in the fall of 2008/early 2009 and was planning on purchasing another Hyundai. I had "steered" friends and neighbors to Hyundai when they were looking at vehicles, and a number of them have purchased a Hyundai.

My intent in originally contacting Hyundai after the accident was that I thought there might be a design flaw or defect that you might want to look into. Fortunately I was not too seriously injured, but if there was a problem someone else (and Hyundai) may not be as fortunate. My intent at that time was not to receive any compensation, but rather to inform you as to a possible problem.

Hyundai's response and "final decision in this matter" does not speak well of Hyundai Motor America, in my mind. The lack of concern, interest, and timely response does not speak well of customer service. Along with the obvious errors and disregard for the facts in Hyundai's correspondence, it is evident that this incident does not matter to Hyundai.

It does matter to me. One of the things that I can do, and will do, as a consumer is take my business elsewhere. I will not buy another Hyundai product. And if anyone asks me for my impression of Hyundai products, I will state the facts (the truth) and let them make the decision as to whether they are comfortable with the vehicles safety systems.

Sincerely,





Hyundai Motor America

10550 Talbert Avenue, P.O. Box 20850, Fountain Valley, CA 92728-0850
TEL: 714-965-3000 FAX: 714-965-3816
WEB: HyundaiUSA.com

September 19, 2007

[REDACTED]
Hastings, MI [REDACTED]

Re: HMA File# [REDACTED]

Dear [REDACTED]

As you requested and in the interest of customer satisfaction, our office has re-reviewed your request for further assistance.

Unfortunately, we respectfully advise that our previous decision stands and no further assistance will be offered. Decisions rendered by this office are the official response of Hyundai Motor America.

We have your comments on file in our office and appreciate your taking the time to write us.

Sincerely,

Carolyn Harvey
National Consumer Affairs
Hyundai Motor America

STATE OF MICHIGAN TRAFFIC CRASH REPORT

ORI: MI-0305600 Department Name MSP WAYMUS

Crash Date Month Day Year 06 21 2007	Crash Time Military 1545	No. of Units 01	Crash Type ☒ Single Motor Vehicle ☐ Head On ☐ Head On-Left Turn ☐ Angle ☐ Rear End ☐ Rear End-Left Turn ☐ Rear End-Right Turn ☐ Sideswipe-Same ☐ Sideswipe-Opposite ☐ Other/Unknown	Special Circumstances ☐ School Bus ☐ Local ☐ Clear ☐ Cloudy ☐ Fog/Smoke ☐ Rain ☐ Daylight ☐ Dawn ☐ Dusk ☐ Dry ☐ Wet ☐ Icy ☐ Snowy ☐ Muddy ☐ Slushy ☐ Debris ☐ Other/Unknown	Special Checks ☐ Fatal (Report All) ☐ Corrected Copy ☐ Replace (Entire Report) ☐ Delete (Entire Report) ☐ Non-Traffic Area ☐ ORV/Snowmobile
County 03	Traffic Control ☒ None of These ☐ Signal ☐ Stop Sign ☐ Yield Sign	Relation to Roadway (Location of First Impact) ☐ Shoulder ☐ Outside of Shoulder/Curb ☐ On Road ☐ Median ☐ Gore ☐ Other/Unknown	Construction Zone (if applicable) (Mark One From Each Group) Type ☐ Const./Maint. ☐ Utility Lane Closed ☐ Yes ☐ No Activity ☐ On Road ☐ Off Road ☐ None	Light (Mark Only One) ☐ Daylight ☐ Dawn ☐ Dusk ☐ Dry ☐ Wet ☐ Icy ☐ Snowy ☐ Muddy ☐ Slushy ☐ Debris ☐ Other/Unknown	Area 10 Total Lanes 2 Speed Limit 50 Posted ☐ Yes ☐ No

Prefix	Road Name 135th AVE	Divided Roadway (N) (S) (E) (W)	Road Type HWY	Suffix
Distance 0.5	Prefix 7th	Divided Roadway (N) (S) (E) (W)	Road Type HWY	Suffix

Unit Number 1	State MI	Date of Birth	License Type ☐ O ☐ CY ☐ C ☐ F ☐ M ☐ R	Sex ☐ M ☐ F	Total Occup 01	Hazard Action 00
Unit Type ☒ MV ☐ B ☐ P ☐ E (train)	Name	Street Address	Injury ☐ K ☐ A ☐ B ☐ C ☐ O	Position 01	Restraint 04	Hospital Penrock
Driver Condition ☐ Yes ☒ No	Interlock ☐ Yes ☒ No	Refused ☐ Yes ☒ No	Not offered ☐ Yes ☒ No	Alcohol ☐ Yes ☒ No	Test Type ☐ Field ☐ PBT ☐ Breath ☐ Blood ☐ Urine	Test Results
Drugs ☐ Yes ☒ No	Test Type ☐ Blood ☐ Urine	Test Results	Vehicle Registration MI	Insurance Secura	Towed To/By Way BP	Vehicle Description Hyundai Elantra

Location of Greatest Damage 01	Extent of Damage 3	Driveable ☒ Yes ☐ No	Vehicle Type ☐ PA ☐ VA ☐ PU ☐ ST ☐ CY ☐ MO ☐ GC ☐ SM ☐ OR ☐ Other ☐ Truck/Bus	Vehicle Direction ☐ North ☐ South ☒ East ☐ West	Special Vehicles 1 2 3 4 5 6	Private Trailer Type 1 2 3 4 5 6 7
-----------------------------------	-----------------------	---	--	--	---------------------------------	---------------------------------------

First Name	Date of Birth	Sex ☐ M ☐ F	Position	Restraint	Hospital
Middle	Street Address	Ambulance			
Last	City	Ejected ☐ Yes ☐ No			
Injury ☐ K ☐ A ☐ B ☐ C ☐ O	State	Zip	Phone Number	Trapped ☐ Yes ☐ No	

First Name	Date of Birth	Sex ☐ M ☐ F	Position	Restraint	Hospital
Middle	Street Address	Ambulance			
Last	City	Ejected ☐ Yes ☐ No			
Injury ☐ K ☐ A ☐ B ☐ C ☐ O	State	Zip	Phone Number	Trapped ☐ Yes ☐ No	

Owner ☒ Owner ☐ Uninjured Passenger ☐ Witness	Name Above Driver	Phone Number	Age	Pos.	Rest.	Address
Owner ☐ Owner ☐ Uninjured Passenger ☐ Witness	Name	Phone Number	Age	Pos.	Rest.	Address

Person Advised of Damaged Traffic Control Date Time Name	Damaged Property Owner & Phone	Public ☐ Y ☐ N
---	-----------------------------------	--

UD-10 SERIAL NUMBER 7802479	Serial Override Number	Do Not Write or Mark In This Area
--------------------------------	------------------------	-----------------------------------

BACK

Do Not Write or Mark On This Side of The Line

Do Not Write or Mark On This Side of The Line

Do Not Write or Mark On This Side of The Line

Forward Original To: Michigan State Police, Traffic Crash Reporting Section,
7150 Harris Drive, Lansing, MI 48913

Unit Number		State		Driver License Number		Date of Birth		License Type		Sex		Total Occup		Hazard Action	
								☐ O ☐ CY ☐ C ☐ F ☐ M ☐ R		☐ M ☐ F					
NCS Unit Type: ☐ MV ☐ B ☐ P ☐ E (train) Name: _____ Street Address: _____ City: _____ State: _____ Zip: _____ Phone Number: _____ Driver Condition: ① ② ③ ④ ⑤ ⑥ ⑦ ⑧ ⑨ ⑩ ⑪ ⑫ Interlock: ☐ Yes ☐ No ☐ Refused ☐ Not offered Alcohol: ☐ Yes ☐ No ☐ Field ☐ PBT ☐ Breath ☐ Blood ☐ Urine ☐ Test Results Drugs: ☐ Yes ☐ No ☐ Test Type ☐ Blood ☐ Urine ☐ Test Results Vehicle Registration: _____ State: _____ Insurance: _____ VIN: _____ Towed To/By: _____ Vehicle Description: _____ Make: _____ Model: _____ Color: _____ Year: _____ Location of Greatest Damage: ① ② ③ ④ ⑤ ⑥ ⑦ ⑧ ⑨ ⑩ ⑪ ⑫ First Impact: _____ Extent of Damage: ☐ Yes ☐ No Vehicle Type: ☐ PA ☐ CY ☐ OR ☐ VA ☐ MO ☐ Other ☐ PU ☐ GC ☐ Truck/Bus ☐ ST ☐ SM (Complete Truck/Bus Section) Vehicle Direction: ☐ North ☐ South ☐ East ☐ West Special Vehicles: ① ② ③ ④ ⑤ ⑥ Private Trailer Type: ① ② ③ ④ ⑤ ⑥ ⑦ Vehicle Defect: ① ② ③ ④ ⑤ ⑥ Vehicle Use: ① ② ③ ④ ⑤ ⑥ ⑦ ⑧ ⑨ ⑩ ⑪ ⑫ Injury: ☐ K ☐ A ☐ B ☐ C ☐ O ☐ Airbag Deployed: ☐ Yes ☐ No ☐ Not Equipped Ejected: ☐ Yes ☐ No ☐ Hospital: ☐ Yes ☐ No Trapped: ☐ Yes ☐ No															
First Name: _____ Middle: _____ Last: _____ Date of Birth: _____ Sex: ☐ M ☐ F Street Address: _____ City: _____ State: _____ Zip: _____ Phone Number: _____ Injury: ☐ K ☐ A ☐ B ☐ C ☐ O ☐ Airbag Deployed: ☐ Yes ☐ No ☐ Not Equipped Ejected: ☐ Yes ☐ No ☐ Hospital: ☐ Yes ☐ No Trapped: ☐ Yes ☐ No Owner: ☐ Owner ☐ Witness ☐ Name: _____ Address: _____ Phone Number: _____ Age: _____ Pos: _____ Res: _____ Uninjured Passenger: ☐ Owner ☐ Witness ☐ Name: _____ Address: _____ Phone Number: _____ Age: _____ Pos: _____ Res: _____ Uninjured Passenger: ☐ Owner ☐ Witness ☐ Name: _____ Address: _____ Phone Number: _____ Age: _____ Pos: _____ Res: _____															

Unit Reported on Front Action Prior: _____ Sequence of Events: First Second Third Fourth 01 04 37 45 Most Harmful: (M) (M) (M) (M)				Unit Reported Above Action Prior: _____ Sequence of Events: First Second Third Fourth Most Harmful: (M) (M) (M) (M)			
Unit Number: _____ Carrier Name: _____ Address: _____ City: _____ State: _____ Zip: _____ GVWR: _____ ICCMC: _____ USDOT: _____ MPSC: _____ Type & Axles: First Second Third Fourth Cargo Body Type: ① ② ③ ④ ⑤ ⑥ ⑦ ⑧				Carrier Source: ☐ Papers ☐ Vehicle ☐ Log Book ☐ Driver Driver's CDL Type: ☐ A ☐ C ☐ H ☐ P ☐ T ☐ B ☐ None ☐ N ☐ S ☐ X CDL Restrictions: ☐ Interstate ☐ Intra (MI Only) ☐ 28 ☐ 29 ☐ 30 CDL Exempt: ☐ Farm ☐ Other Vehicle Type: ☐ AS ☐ AL ☐ BS ☐ CX ☐ AA ☐ AT ☐ BB ☐ BX ☐ AH ☐ AX ☐ BH ☐ CH ☐ AN ☐ AY ☐ BN ☐ CP ☐ AP ☐ AZ ☐ BP ☐ CS Medical Card: ☐ Y ☐ N Hazardous Material: ☐ Placard ☐ Cargo Spill Class #: _____			

Crash Diagram and Remarks 	
VEH #1 WAS E/B ON I-55M. DR. HAD TO RUN OFF THE ROAD TO MISS AUB JEN. THE W/B VEHICLE SLOWED AND WATCHED #1 CRASH. IT DID NOT STOP AND ROLLOVERED.	

LID-10 SERIAL NUMBER 7802479		Investigated at Scene: _____ Reported Date/Time: 6-21-07 Investigator Name(s) & Badge # (Print Only): 1 P2 May 2007 569		Photos By: _____	
--	--	--	--	------------------	--

Do Not Write or Mark Below This Line

Site of impact.





**Site of accident.
Notice tire tracks.**



Shows distance traveled from road
to impact.
(Speed of 50–55mph)



A photograph of a grassy field with a dark object in the center. The object is partially obscured by dry grass and appears to be a dark, irregular shape. Two thin white lines, possibly wires or ropes, run horizontally across the image. The text "Site of impact" is overlaid in the upper right quadrant.

Site of impact



792-2103 - 6 PM.

















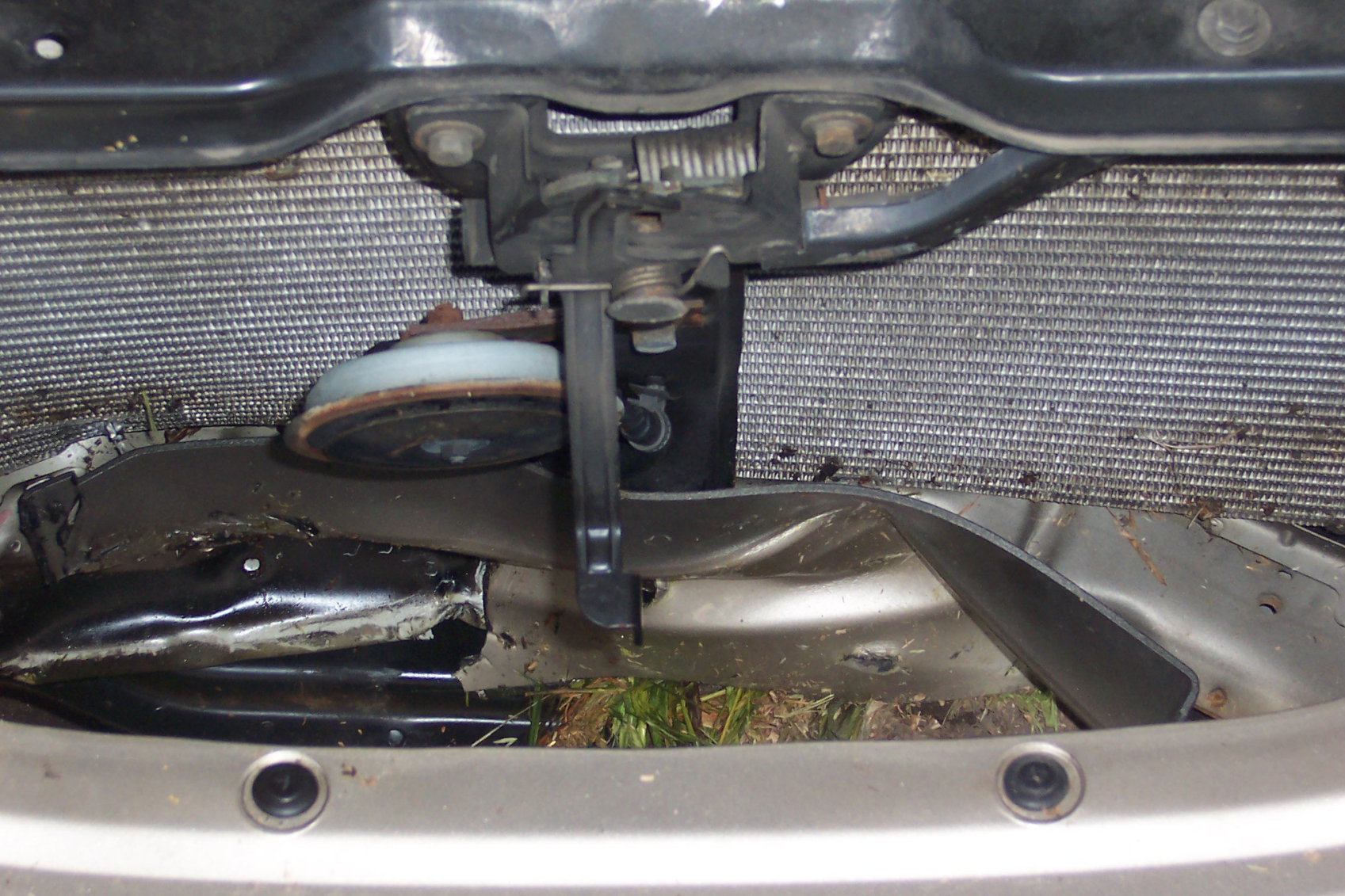


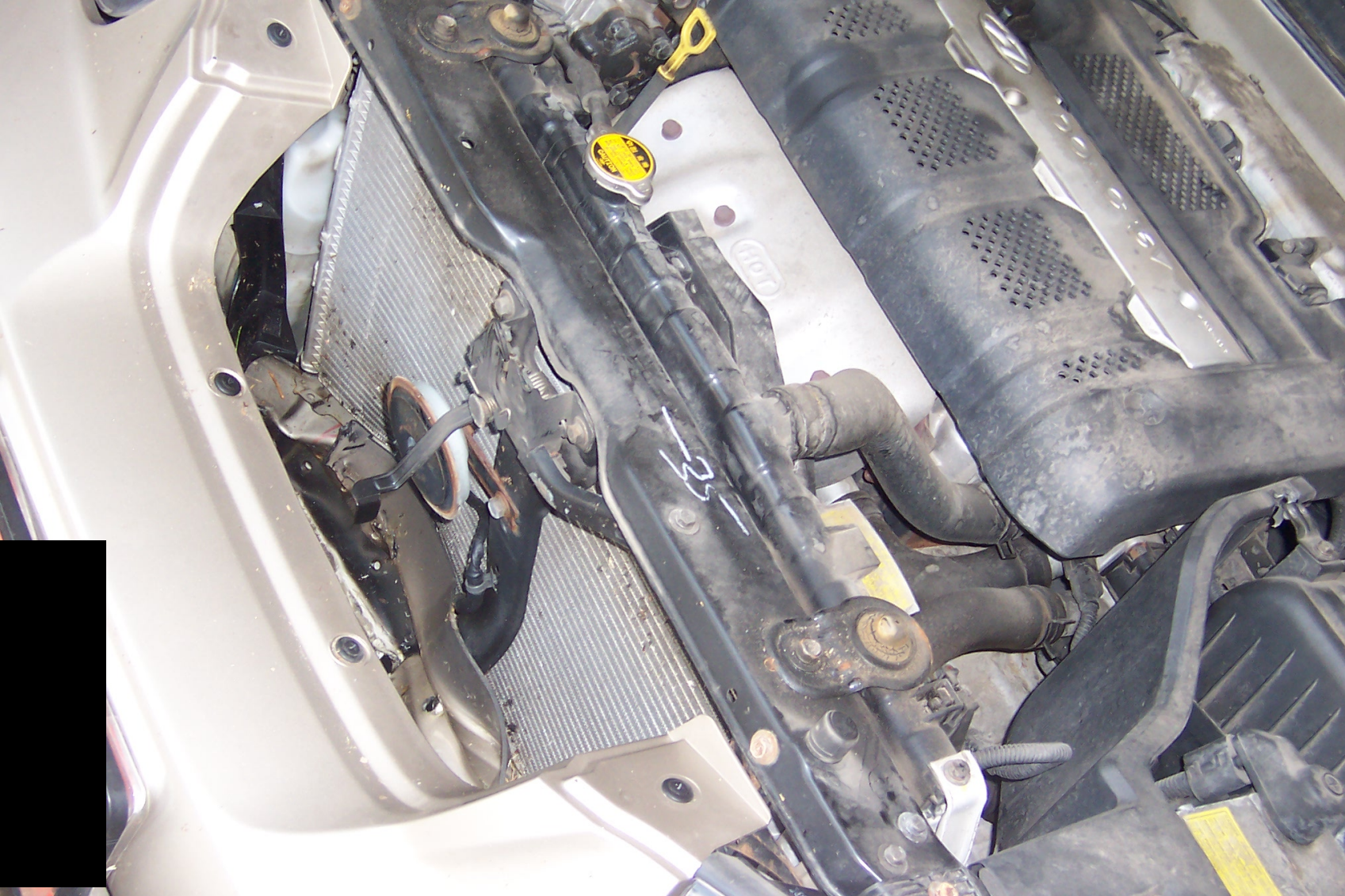






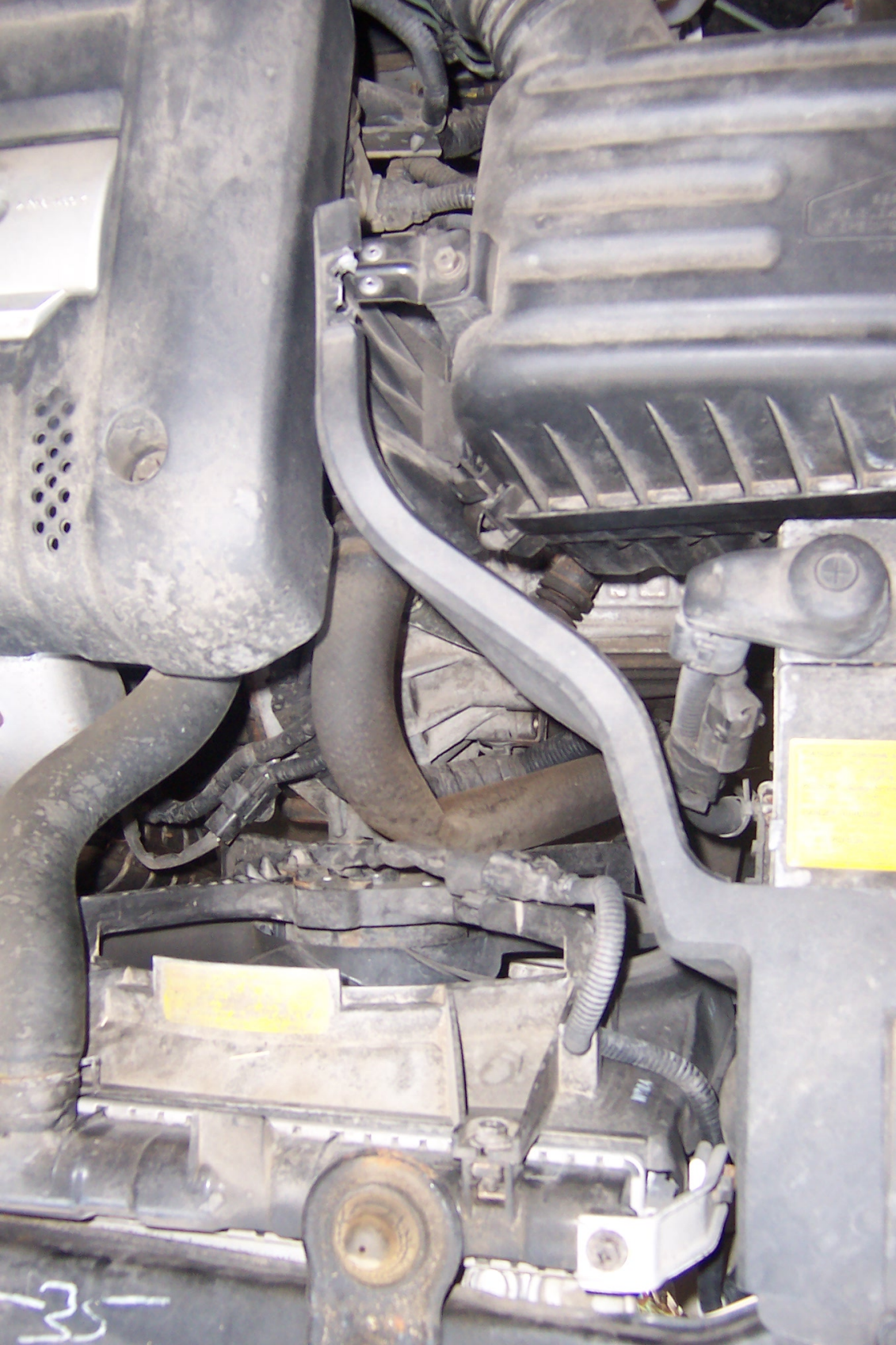












**Damage from grazing
electric fence post.**







**Hood dent from force
of impact.**



**Windshield damage
at "seam" from
impact.**



**Some of the glass "shavings" from
windshield.**

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