 <b>DOT Auto Safety Hotline</b> <b>Vehicle Owner's Questionnaire</b> <b>To Report Vehicle Safety Defects</b> <b>1-888-DASH-2-DOT</b> <b>(1-888-327-4236)</b> <b>INTERNET:www.nhtsa.dot.gov/hotline</b>				FOR AGENCY USE ONLY 100148	
				Date Received <b>MAY 23 2011</b> 14-APR-2011	
<b>OWNER INFORMATION (Type or Print)</b>					
Name			Daytime Telephone Number		E-mail Address
Address			Evening Telephone Number		
City NORWALK		State CA	Zip Code		
The information you provide will be used to identify potential safety-related defects. We may share your information with the applicable vehicle manufacturer during an investigation or recall in accordance with the routine uses described in the agency's Privacy Act notice. See 49 FR 53971 (Sep. 3, 2004).					
<b>VEHICLE INFORMATION</b>					
17 digit Vehicle Identification Number Located at bottom of windshield on driver's side WBANE53556C			Make BMW	Model 5 SERIES	Model Year 2006
Date Purchased	Dealer's Name and Telephone Number			Engine: No: Cylinders	Fuel Type:
Original Owner <input type="checkbox"/>	Dealer's City		State	Zip Code	
Transmission Type	<input type="checkbox"/> Antilock Brakes	Powertrain	Multiple Failure:		Incident Date(s) 12-DEC-2010
	<input type="checkbox"/> Cruise Control				
<b>FAILED COMPONENT(S)/PART(S) INFORMATION</b>					
Vehicle Component Code: 141000 AIR BAGS: FRONTAL				Failure Mileage 90000	Failure Speed 0
<b>ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A TIRE FAILURE</b>					
Tire Make		Tire Model (Name or Number)		Tire Size (Example P215/65R15)	
DOT No. (Example: DOTM19ABC036)		<input type="checkbox"/> Original Equipment <input type="checkbox"/> Prior Repair	Failure Location:		
Tire Component Code			Tire Failure Type:		
<b>ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A CHILD SEAT FAILURE</b>					
Make:		Date Manufactured:	Model No./Name:		
Seat Type:		Installation System:			
Child Seat Component Code:		Failed Part:			
<b>APPLICABLE INCIDENT INFORMATION</b> <i>(Please describe in detail the incident(s), Failure(s), Crash(es), and injury(ies).)</i>					
Crash <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Fire <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Number of Persons Injured	Number of Deaths	Reported to Police N	
<b>Narrative Description of Incident(S), Crash(es), and Injury(ies).</b> 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 2006 BMW 525I. THE VEHICLE WAS PARKED WITH THE PASSENGER SEAT OCCUPIED WHEN THE AIR BAG WARNING LIGHT ILLUMINATED AND REMAINED ILLUMINATED. THE FAILURE WAS ONGOING FOR APPROXIMATELY SIX MONTHS AND THE VEHICLE WAS TAKEN TO THE DEALER. THE DEALER ADVISED HIM THAT THE FRONT PASSENGER SEAT SENSOR WAS FAILING AND WOULD NEED TO BE REPLACED. HE THEN CALLED THE MANUFACTURER AND REFERENCED NHTSA CAMPAIGN ID NUMBER: 08V384000(AIR BAGS:FRONTAL) AND WAS ADVISED THAT HIS VEHICLE WAS NOT INCLUDED IN THE RECALL. THE VEHICLE WAS NOT REPAIRED. THE APPROXIMATE FAILURE MILEAGE WAS 90,000 AND THE CURRENT MILEAGE WAS 102,000.					
Include, if available: Police/Fire Department Report, Photos, and Repair Invoice. <b>ATTACH ADDITIONAL SHEETS IF NECESSARY.</b>					
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)**

VEHICLE WAS TAKEN TO DEALER AND FOUND 102123 FULL PART M SEAT MA SENSOR  
DEALER PERFORMED REPAIR AND BMW NORTH AMERICA ALSO PERFORMED REPAIR TO FIX  
THIS MANUFACTURER DEFECTIVE DEVICE. THEY STATED THAT MY VEHICLE'S VIN WAS  
NOT PART OF THE (2011) AND ASSEMBLY LINE. IT IS OBVIOUS  
THAT MY CAR IS HAVING ISSUES PER REPAIR ISSUE FOUND THEY ALSO  
SHOULD LOOK AT OTHER ASSEMBLY LINES IN THAT YEAR. I HAVE  
ATTACHED A COPY OF THE INVOICE.

ATTACH ADDITIONAL SHEETS IF NECESSARY

US Department of Transportation

National Highway Traffic Safety Administration

1200 New Jersey Avenue SE. Washington, D.C. 20077-9382

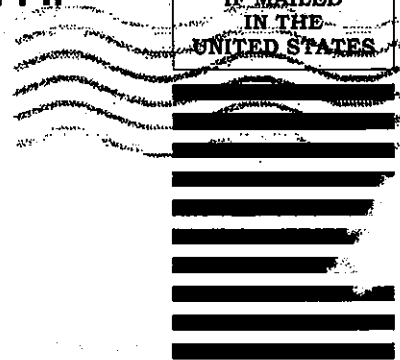
Official Business Penalty for Private Use \$300



SANTA ANITA CA 9237

02 MAY 2011 PM 5 T

NO POSTAGE NECESSARY IF MAILED IN THE UNITED STATES

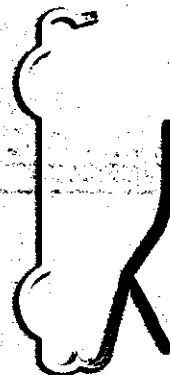


**BUSINESS REPLY MAIL**  
FIRST-CLASS MAIL PERMIT NO. 1888 WASHINGTON, DC  
POSTAGE WILL BE PAID BY ADDRESSEE

US Department of Transportation  
National Highway Traffic Safety Administration  
Office of Defects Investigation, NVS-210  
1200 New Jersey Avenue SE.  
Washington, D.C. 20077-9382



Think your vehicle has a safety defect?



If so:

Use the enclosed form to file a report.

or visit:

[www.safecar.gov](http://www.safecar.gov)

or call:

Vehicle Safety Hotline  
888-327-4236



Vehicle Owner's Questionnaire (VOQ)  
U.S. Department of Transportation  
National Highway Traffic Safety Administration  
[www.nhtsa.gov](http://www.nhtsa.gov)

CUSTOMER #: 146035  
UNIT# AFTGIL

188316



\*INVOICE\*

10900 Firestone Blvd., Norwalk, CA 90650  
(562) 868-3233  
(800) 954-4BMW  
FAX (562) 864-8648

NORWALK, CA

PAGE 2

HOME: [REDACTED] CONT: [REDACTED]  
BUS: [REDACTED] CELL: [REDACTED]

SERVICE ADVISOR: 3945 ERIC LOPEZ

B.A.R. NO. ARD 071433 EPA NO. CAD 918617838

COLOR	YEAR	MAKE/MODEL	VIN	LICENSE	MILEAGE IN/OUT	TAG	
BLACK	06	BMW 525I	WBANE53556 [REDACTED]	[REDACTED]	102123/102123	T5008	
DEL DATE	PROD DATE	WARR EXP	PROMISED	PO NO	RATE	PAYMENT	INV DATE
02FEB06	DD01DEC05	01FEB2010	20:00 12APR11		0.00	CASH	15APR11
R.O OPENED	READY	OPTIONS: STK:AFTGIL ENG:3.0 Liter					
07:46 12APR11	12:10 15APR11						

LINE	OPCODE	TECH	TYPE	HOURS	LIST	NET	TOTAL
						521.50	521.50

OVER BUMPS OR DIPS.PLEASE CHECK AND ADVISE  
3200 STEERING SYSTEM DIAGNOSIS  
351 LOPEZ,ALEX LIC#: A  
CB  
1 31-12-0-305-612 SET RUBBER MOUNTING F PULL  
R:311030 101.93 101.93 101.93  
PARTS: 101.93 LABOR: 521.50 OTHER: 0.00 TOTAL LINE C: 623.43  
102123 BLOWN THRUST ARM BUSHINGS 350.00 TEST DROVE VEHICLE. WAS NOT  
ABLE TO VERIFY NOISE OVER BUMPS. INSPECTED VEHICLE AND FOUND BLOWN  
THRUST ARM BUSHINGS. AS PER CUSTOMER REMOVED AND REPLACED THRUST ARM  
BUSHINGS.

\*\*\*\*\*  
D CUSTOMER STATES WHEN PERSON SITS IN FRONT PASSENGER SEAT,SRS  
MALFUNCTION LIGHT,RESTRANT SYSTEM MALFUNCTION LIGHT COMES  
ON.PLEASE CHECK AND ADVISE  
6200 INSTRUMENTATION DIAGNOSIS  
351 LOPEZ,ALEX LIC#: A  
IBN (N/C)

PARTS: 0.00 LABOR: 0.00 OTHER: 0.00 TOTAL LINE D: 0.00  
102123 FAULTY PASS. SEAT MAT SENSOR CUSTOMER DECLINED WORK AT THIS  
TIME

\*\*\*\*\*  
E CHECK AND ADJUST TIRE PRESSURE - NOTE TIRE PRESSURE MEASUREMENTS  
AFTER THE SERVICES WERE PERFORMED  
TP CHECK AND ADJUST TIRE PRESSURE - NOTE TIRE  
PRESSURE MEASUREMENTS AFTER THE SERVICES  
WERE PERFORMED

**McKenna's Service Department offers you:**

- Certified Technicians & Service Advisors
- A clean, comfortable Service Area
- Convenient Service Hours Mon - Fri 7AM to 6PM - Sat 8AM to 5PM
- Competitive Pricing
- Appointment Scheduling
- An extensive inventory of Parts & Accessories
- 12,000 miles or 1 Year warranty Parts & Labor
- Top CSI Awarded Dealership.
- All NPN part numbers are factory equivalent

• I acknowledge notice and oral approval of an increase in the original estimate price.

signature

DESCRIPTION	TOTALS
LABOR AMOUNT	
PARTS AMOUNT	
GAS, OIL, LUBE	
SUBLET AMOUNT	
MISC. CHARGES	
TOTAL CHARGES	
DISCOUNT/ADJ.	
SALES TAX	
PLEASE PAY THIS AMOUNT	

I hereby authorize the repair work herein set forth to be done along with the necessary material and agree that you are not responsible for loss or damage to vehicle or articles left in vehicle in case of fire, theft, or any other cause beyond your control or for any delays caused by unavailability of parts or delays in parts shipments by the supplier or transporter. I hereby grant you and/or your employees permission to operate the vehicle herein described on streets, highways or elsewhere for the purpose of testing and/or inspection. An express mechanic's lien is hereby acknowledged on above vehicle to secure the amount of repairs thereto.

I HEREBY ACKNOWLEDGE RECEIPT OF A COPY HEREOF.

X

WARNING Motor vehicles contain chemicals known to the State of California to cause cancer and birth defects or other reproductive harm. These chemicals are contained in many vehicle components and replacement parts, vehicle fluids, and paints and materials used to maintain vehicles, including, but not limited to, fuel, oil, batteries, brakes, and wheel balancing weights. When you service, clean or maintain your car, you will be exposed to listed chemicals contained in used oil, waste and replacement fluids, fumes, grease, grime, touchup paint, certain replacement parts, and particulates from component wear. When we service your car, we will return used components to you upon request. Used parts and components contain chemicals known to the State of California to cause cancer and birth defects or other reproductive harm. To minimize your exposure when servicing, maintaining or cleaning your vehicle: 1) work in a well ventilated area; 2) do not smoke, drink or eat while working; 3) wash your hands when finished or when taking a break; and 4) follow all manufacturer instructions pertaining to proper use and maintenance of motor vehicles and vehicle components. (Posted in accordance with Proposition 65 in Cal. Health & Safety Code §25249.5 et seq.) For further information about Proposition 65: <https://www.calha.org/prop65.html>

CUSTOMER COPY