

INFORMATION Redacted PURSUANT TO THE FREEDOM OF

 U.S. Department of Transportation National Highway Traffic Safety Administration		INFORMATION ACT (FOIA), 5 U.S.C. 552(B)(6) 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 01-NOV-2012		Repository ☐ Reference No. 10482891	
OWNER INFORMATION (Type or Print)					
Name		Daytime Telephone Number		E-mail Address	
Address		Evening Telephone Number			
City	State	Zip Code			
SHIRLINGTON	PA				
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).					
VEHICLE INFORMATION					
17 digit Vehicle Identification Number Located at bottom of windshield on driver's side		Make	Model	Model Year	
4A32B2FF5A		MAZDA	PROTEGE	2010	
Date Purchased	Dealer's Name and Telephone Number		Engine:	Fuel Type:	
Nov 18 2011	Anthony's Chrysler Jeep Dodge 610-286-9450		No: Cylinders		
Original Owner	Dealer's City	State	Zip Code		
☐	Morgantown	Pa			
Transmission Type	☐ Antilock Brakes	Powertrain	Multiple Failure:	Incident Date(s)	
	☐ Cruise Control			31-OCT-2012	
FAILED COMPONENT(S)/PART(S) INFORMATION					
Vehicle Component Code: 140000 AIR BAGS			Failure Mileage	Failure Speed	
			46883	0	
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: DOTM9A8C036)	☐ Original Equipment	Failure Location:			
	☐ Prior Repair				
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	1	0	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).					
TL* THE CONTACT OWNS A 2010 MITSUBISHI GALANT. THE CONTACT STATED THAT AFTER ACCELERATING FROM A STOP LIGHT AND ATTEMPTING A RIGHT TURN, THE DRIVER SIDE AIR BAG DEPLOYED WITHOUT WARNING. THE CONTACT SUSTAINED INJURIES TO THE LEFT HAND AS A RESULT. THE POLICE WERE NOT CONTACTED. THE CONTACT WAS LATER TRANSPORTED TO THE HOSPITAL FOR TREATMENT. THE VEHICLE WAS NOT INSPECTED BY A DEALER OR AN INDEPENDENT MECHANIC FOR THE ERRONEOUS AIR BAG DEPLOYMENT. THE MANUFACTURER WAS NOT CONTACTED. THE FAILURE AND CURRENT MILEAGES WERE APPROXIMATELY 46,883.					
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)

Making right turn from Red-lighters making turn air bag went off. I could not see. Stop car opened door
hard breath. A person came to help me he turned off horn but air bag. My husband came took car
home, On 11-12 called my insurance & Anthony where we got car from around 8:45 AM took car to Anthony's
they told us they can not help us we had to a Mitsubishi Dealership, way back from Anthony's I went to
St Joseph Health Urgent Care. Elverson, my left hand & eyes check from air bag left hand was
trailed swelling discolored skin ring finger, hand, headache, bad taste from air bag. Also
my passenger side floor was wet about 1" water front to back of car, after air bag went off.
I called Mitsubishi talked to Dietra they never sent any one to look at my car, they called me and said I must have
it something which I did not. my insurance Frank he said there was no damage to make air bag go
off. [REDACTED] ATTACH ADDITIONAL SHEETS IF NECESSARY Thank you
if you need more info. [REDACTED]

U.S. Department
of Transportation

National Highway
Traffic Safety
Administration

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

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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.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

