

INFORMATION ACT (FOIA), 5 U.S.C. 552(B)(6)



U.S. Department of Transportation

National Highway Traffic Safety Administration

**Vehicle Owner's Questionnaire**  
**To Report Vehicle Safety Defects**  
 1-888-DASH-2-DOT  
 (1-888-327-4236)  
 INTERNET: www.nhtsa.dot.gov/hotline

Date Received

15-SEP-2014

Repository

Reference No.  
10633369

**OWNER INFORMATION (Type or Print)**

Name: [REDACTED]  
 Address: [REDACTED]  
 City: FULTON State: KY Zip Code: [REDACTED]

Daytime Telephone Number

Evening Telephone Number

E-mail Address  
NOEMAIL@UNK.GOV

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: 1G1ND52MXX6 [REDACTED]  
 Make: CHEVROLET Model: MALIBU Model Year: 1999  
 Date Purchased: Dealer's Name and Telephone Number: Engine: No: Cylinders: 6 Fuel Type: Unleaded Gas  
 Original Owner:  Dealer's City: State: Zip Code:  
 Transmission Type:  Antilock Brakes  Cruise Control Powertrain: AWT Multiple Failure: Incident Date(s): 15-SEP-2011, 3-9-2011

**FAILED COMPONENT(S)/PART(S) INFORMATION**

Vehicle Component Codes: 110000 ELECTRICAL SYSTEM, 140000 AIR BAGS, ENGINE (PWS)  
 Failure Mileage: Failure Speed:

**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: DOTM9ABC036)  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 OWNED A 1999 CHEVROLET MALIBU. WHILE DRIVING AT AN UNKNOWN SPEED, THE VEHICLE STALLED WITHOUT WARNING AND CRASHED. THE AIR BAGS FAILED TO DEPLOY. A POLICE REPORT WAS FILED. THE CONTACT SUSTAINED INJURIES THAT REQUIRED MEDICAL ATTENTION. THE CONTACT RECEIVED A RECALL NOTIFICATION FOR NHTSA CAMPAIGN NUMBER: 14V400000 (ELECTRICAL SYSTEM). THE VEHICLE WAS DESTROYED. THE MANUFACTURER WAS NOT MADE AWARE OF THE FAILURE. THE FAILURE MILEAGE WAS UNKNOWN.

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 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.