


DEC 01 2014

 <p>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</p>			FOR AGENCY USE ONLY 100148		
U.S. Department of Transportation National Highway Traffic Safety Administration			Date Received 28-OCT-2014	Repository <input type="checkbox"/> Reference No. 10650864	
OWNER INFORMATION (Type or Print)					
Name			Daytime Telephone Number		E-mail Address
Address			Evening Telephone Number SAME		
City	State	Zip Code			
HUBBARD	OH				
<i>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).</i>					
VEHICLE INFORMATION					
17 digit Vehicle Identification Number Located at bottom of windshield on driver's side		Make	Model	Model Year	
JS2YB5A30B6		SUZUKI	SX4	2011	
Date Purchased	Dealer's Name and Telephone Number		Engine:	Fuel Type:	
8-20-2011	WRIGHT AUTO GROUP 724-9354646		No: Cylinders		
Original Owner	Dealer's City	State	Zip Code		
<input checked="" type="checkbox"/>	WEXFORD, PA 15076-9303	PENN			
Transmission Type	<input checked="" type="checkbox"/> Antilock Brakes	Powertrain	Multiple Failure:	Incident Date(s)	
AUTO	<input checked="" type="checkbox"/> Cruise Control			01-SEP-2014	
FAILED COMPONENT(S)/PART(S) INFORMATION					
Vehicle Component Code: 140000 AIR BAGS			Failure Mileage	Failure Speed	
PASSANGER SIDE AIR BAG LIGHT OFF WITH PASSANGER SEAT BELT ON			16000		
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)		<input type="checkbox"/> Original Equipment	Failure Location:		
		<input type="checkbox"/> 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 <i>(Please describe in detail the incident(s), Failure(s), Crash(es), and Injury(ies).)</i>					
Crash	Fire	Number of Persons Injured	Number of Deaths	Reported to Police	
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	0	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 2011 SUZUKI SX4. THE CONTACT STATED THAT THE PASSENGER SIDE AIR BAG WARNING LIGHT REMAINED ILLUMINATED ALTHOUGH THE PASSENGER SEAT WAS OCCUPIED. THE VEHICLE WAS REPAIRED ACCORDING TO NHTSA CAMPAIGN NUMBER: 13V405000 (AIR BAGS); HOWEVER, THE FAILURE PERSISTED. THE MANUFACTURER WAS NOT MADE AWARE OF THE FAILURE. THE APPROXIMATE FAILURE MILEAGE WAS 16,000.					
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)

MY WIFE IS THE ONLY DRIVER.
I DISCOVERED THE PASSANGE AIR BAG REMAINED
THE SAME AS WAS BEFOR REPAIR.
I WAS TOLD IT WAS PASS MY WARRANTY. IF THAT IS NOT
THE PROBLEM I WOULD HAVE TO PAY THE REPAIR.
I DO NOT WANT TO PAY FOR THIS FAILURE BECAUSE
WE STILL HAVE THE SAME DEFECT. I REPORTED
THE DEFECT MONTHS BEFOR REPAIRED. I WAS TOLD WE HAVE
TO WAIT FOR TH PART. ATTACH ADDITIONAL SHEETS IF NECESSARY

U.S. Department
of Transportation

National Highway
Traffic Safety
Administration

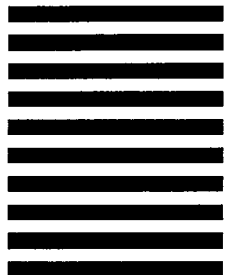
1200 New Jersey Avenue SE.
Washington, D.C. 20077-9382

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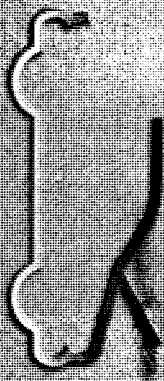
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US Department of Transportation
National Highway Traffic Safety Administration
Office of Defects Investigation, NVS-210
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Washington, D.C. 20077-9382



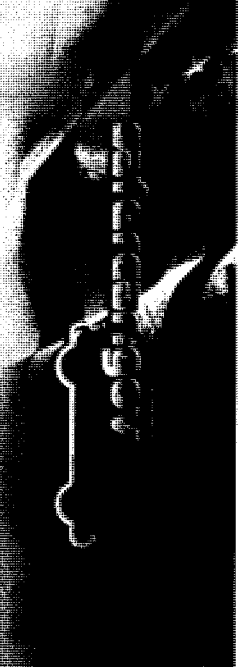
Think your vehicle has a safety defect?



If so:
Use the enclosed form to file a report.

or visit:
www.safercar.gov

or call:
Vehicle Safety Hotline
888-327-4236



NHTSA

NATIONAL HIGHWAY TRAFFIC SAFETY ADMINISTRATION
U.S. DEPARTMENT OF TRANSPORTATION
WASHINGTON, DC 20590