

JAN 23 2015

INFORMATION Redacted PURSUANT TO THE FREEDOM OF

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

DOT Auto Safety Hotline

FOR AGENCY USE ONLY 100148

U.S. Department
of TransportationNational 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

12-NOV-2014

Repository ☐Reference No.
10654466

OWNER INFORMATION (Type or Print)

Name

Address

City HORSESHOE BAY

State TX

Zip Code

Daytime Telephone Number

E-mail Address

Evening Telephone Number

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

ZFBCFADH6EZ

Make

FIAT

Model

500L

Model Year

2014

Date Purchased

6-22-14

Dealer's Name and Telephone Number

Fiat of Austin

Engine:

No: Cylinders

Fuel Type:

87
Unleaded

Original Owner

☒

Dealer's City

Austin, TX

State

TX

Zip Code

78750

Transmission Type

Auto

☒ Antilock Brakes

Powertrain

☒ Cruise Control

Multiple Failure:

Incident Date(s)

08-NOV-2014

FAILED COMPONENT(S)/PART(S) INFORMATION

Vehicle Component Code: 140000 AIR BAGS

Failure Mileage

10000

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

0

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 2014 FIAT 500L. WHILE DRIVING VARIOUS SPEEDS, AN ANIMAL JUMPED IN FRONT OF THE VEHICLE. THE VEHICLE VEERED TO THE RIGHT AND CRASHED INTO A LAKE. THE AIR BAGS FAILED TO DEPLOY. THE CONTACT DID NOT SUSTAIN ANY INJURIES. A POLICE REPORT WAS FILED. THE VEHICLE WAS DESTROYED. THE MANUFACTURER WAS NOT NOTIFIED OF THE FAILURE. THE CONTACT RECEIVED A NOTIFICATION FOR NHTSA CAMPAIGN NUMBER: 14V481000 (AIR BAGS) AND BELIEVED THE FAILURE WAS RELATED TO THE RECALL. THE APPROXIMATE FAILURE MILEAGE WAS 10,000.

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.