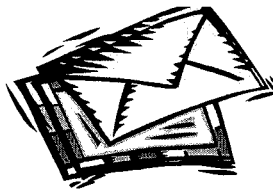


NHTSA ccmMercury Routing Slip



CL-10730465-7917

Printed: 7/21/2015

INFORMATION Redacted PURSUANT TO THE FREEDOM OF
INFORMATION ACT (FOIA), 5 U.S.C. 552(B)(6)

NHTSA #: ES15-003665

XREF #:

Delivery: FAX

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Address To: NOA02

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Due Date: 8/18/2015

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DOT/I #:

RMP #:

**Subject: LETTER FROM SENATOR BILL NELSON TO DAVID FRIEDMAN RE CONSTITUENT [REDACTED]
[REDACTED] CONCERNING HER 2001 BMW 325XI PASSENGER SIDE TAKATA AIRBAG4**

Ack Date:

Sign Office: DIR. GOVT.

AFFAIRS

Cleared Date:

File Loc:

Added By: JKORKOR x69591

Ack By:

Signature: ALISON PASCALE

Cleared By:

XREF File:

Modified By: JULIE.KORKOR

Signed For:

Cleared For:

Closed Date:

Most Recent Comment:

Author:

THE HONORABLE BILL NELSON
UNITED STATES SENATOR
LANDMARK TWO
225 EAST ROBINSON STREET, SUITE 410
ORLANDO, FL 32801
Tel: 407-872-7161 Fax: 407-872-7165 E-mail:

JUL 22 2015

Assigned To	Task	Asgn Date	Deadline	Returned Date
NVS-200	REPLY	7/21/2015		
NGA-110	SIGN	7/21/2015		

ET
72215
SNP



United States Senate

WASHINGTON, DC 20510-0905

BILL NELSON
FLORIDA

July 21, 2015

Mr. David J. Friedman
Administrator
National Highway Traffic and Safety Administration
1200 New Jersey Avenue, Southeast
Washington, District of Columbia 20590

Dear Mr. Friedman:

Please find enclosed correspondence I received from one of my constituents. It involves an important matter under the jurisdiction of your agency.

Your review and response to the issues raised would be greatly appreciated. Please send your correspondence directly to my office and reference [REDACTED] for our records. I look forward to a response at your earliest convenience and thank you in advance for your assistance with this matter.

Sincerely,

BN/smb
[REDACTED]

Enclosure

BILL NELSON
FLORIDAUnited States Senate
Washington, DC 20510-0905

Consent For Release Of Information

The Privacy Act of 1974 requires that written consent be obtained from the constituent before information can be disclosed from a government agency's record. So that I can legally act on your behalf, please complete and sign the following statement and return it to me. *This form is available to the public free of charge.*

Please note, if you are inquiring on behalf of someone, that person must sign the release.

Today's Date 7/2/15 Social Security Number [REDACTED]☐ Mr. ☐ Mrs. ☒ Ms. ☐ Dr. [REDACTED]

First

Middle

Last

Mailing
AddressWEST PALM BEACH
FLORIDA

Home Phone [REDACTED]

Cell Phone [REDACTED]

Work Phone [REDACTED]

Date of Birth [REDACTED]

E-mail Address [REDACTED]

I hereby authorize Senator Nelson or his representative to make inquiries into my personal records and or files, and to obtain information about me pertaining to my request for assistance.

Signature [REDACTED]

For The Attention Of [REDACTED]

Please return form to:

By Mail:

Office of Senator Bill Nelson
225 East Robinson Street, Suite 410
Orlando, Florida 32801

By Fax:

Fax: (407) 872-7165

Questions:

Telephone: (407)-872-7161
Toll-Free in Florida Only:
(888) 671-4091

FOR OFFICE USE ONLY

IT: ☐ Yes ☐ No IT # _____ (Caseworker Only) Cross Reference Name _____Referral: ☐ FTL ☐ FTM ☐ JAX ☐ MIA ☐ ORL ☐ TAL ☐ TPA ☐ WPB ☐ BN ☐ GN ☐ PM ☐ BS

Web Tracking # _____

PLEASE COMPLETE PAGE 2 OF THIS FORM

Please complete the sections that apply to your case.

Military or Veteran's Issues

Military ID/VA ID/Other ID Number _____

Sponsor's ID / SSN _____

Rank / Unit _____

Duty Station _____

Immigration Issues

Receipt Number _____

Alien Registration Number _____

A - _____

Date of Birth _____

Place of Birth _____

Type of Application Filed _____

Social Security Administration Issues

Type of file claimed? _____

Initial Claim	Date Filed _____	☐ Pending	☐ Approved	☐ Denied
Reconsideration	Date Filed _____	☐ Pending	☐ Approved	☐ Denied
ALJ Hearing	Date Filed _____	☐ Pending	☐ Approved	☐ Denied
Appeals Council	Date Filed _____	☐ Pending	☐ Approved	☐ Denied

Case Details

Please briefly explain your problem. (In writing, provide my office with a detailed account. Include any additional relevant correspondence that you have initiated or received concerning your problem.)

Please see my attached letter to BMW North America for my full story.

I want my driver side airbag recalled and replaced, 2001 BMW 325XI

It does not appear on safecar.gov and BMW does not currently recall the Takata driver side airbag on my car.

Please state how you would like Senator Nelson to help you.

Please continue your interest in this issue, and hopefully my vehicle driver side airbag will be recalled. My life is in danger!

Thank you!

Copy for
Senator Bill Nelson

[REDACTED]
West Palm Beach, Fl. [REDACTED]

July 1, 2015

Customer Relations
BMW of North America
P.O. Box 1227
Westwood, N.J. 07675

Gentlemen:

I am the original owner of a 2001 BMW 325XI. My vehicle's passenger side Takata airbag was recalled in a BMW letter to me in Sept. 2014. Braman Motors of West Palm Beach, Fl. services my car. They replaced the airbag on 9/24/2014-9/29/2014. I thought all was well at the time.

A few months ago I watched the CSPAN televised Senate hearing on Takata airbags and was glad to know I had received a recall letter from BMW. I used my VIN number to register my vehicle on safecar.gov and have been checking periodically for a driver side recall. This website currently says no open recalls on my vehicle.

A week ago I watched another CSPAN televised Senate hearing on the Takata airbags and paid attention to NHTSA's recommendation that BOTH the driver AND passenger airbags must be recalled and replaced.

Obviously, as a Florida resident, I felt alarmed to not have heard from BMW about a driver side recall on my vehicle.

I called your Customer Relations Dept. in N.J. and was told that the driver and passenger airbags were recalled on cars from 2002 through 2006. This seems absurd. The driver side airbag is closer to the driver than the passenger side airbag is to a potential passenger. Owners from 2002-2006 are much safer than I am!

I fear possible premature death and/or the possibility of permanent injury as the primary driver without a driver side airbag replacement of my vehicle.

I have contacted my Florida U.S. Senators and U.S. Florida House Representative for my District, as well as NHTSA, informing them of my lack of driver side recall and concern.

Please recall my vehicle for driver side airbag replacement.

VIN: WBAAV334X1E [REDACTED]

Sincerely,
[REDACTED]

BILL NELSON
FLORIDA

United States Senate
WASHINGTON, DC 20510-0905



Date: 07/21/2015 Number of pages (including cover sheet): 5

To: National Highway Traffic and Safety Administration Fax: 202-366-0015
From: Scott Bunce Fax: (407) 872-7165

Comments

RE: [REDACTED] Takata airbag concerns

Thank you for your assistance.

Scott Bunce
407-872-7164
407-872-7165 FAX
scott_bunce@billnelson.senate.gov