


INFORMATION Redacted PURSUANT TO THE FREEDOM OF

 <p>U.S. Department of Transportation National Highway Traffic Safety Administration</p>	<p>INFORMATION ACT (FOIA), 5 U.S.C. 552(B)(6) 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	
		Date Received 29-APR-2016 JUL 12 2016	Repository <input type="checkbox"/> Reference No. 10862199
OWNER INFORMATION (Type or Print)			
Name		Daytime Telephone Number	
Address		E-mail Address	
City	State	Zip Code	
BEVERLY HILLS	CA		
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		Make	Model
WBAEJ13491A		BMW	Z8
Model Year		Engine:	
2001		No: Cylinders	
Date Purchased	Dealer's Name and Telephone Number		Fuel Type:
Original Owner	Dealer's City	State	Zip Code
<input type="checkbox"/>			
Transmission Type	<input type="checkbox"/> Antilock Brakes	Powertrain	Multiple Failure:
	<input type="checkbox"/> Cruise Control		Incident Date(s)
			01-JAN-2015
FAILED COMPONENT(S)/PART(S) INFORMATION			
Vehicle Component Codes: LIGHTING (PWS), 123000 EXTERIOR LIGHTING: TAIL LIGHTS			Failure Mileage
			31000
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: DOTM19ABC036)	<input type="checkbox"/> Original Equipment <input type="checkbox"/> 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	Fire	Number of Persons Injured	Number of Deaths
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
			Reported to Police
			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 2001 BMW Z8. WHILE DRIVING VARIOUS SPEEDS, THE CONTACT WAS INFORMED THAT THE REAR LIGHTS FAILED TO FUNCTION. THE VEHICLE WAS TAKEN TO AN INDEPENDENT MECHANIC WHO DIAGNOSED THAT THE TAIL LIGHT ASSEMBLY NEEDED TO BE REPLACED. THE VEHICLE WAS NOT REPAIRED. THE MANUFACTURER WAS NOTIFIED OF THE FAILURE. THE FAILURE MILEAGE WAS 31,000.			
I was informed by a policeman who pulled me over due to taillight not working and as that is illegal.			
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.			