INFORMATION REDACTED PURSUANT TOTHE FREEDOM OF INFORMATION ACT (FOIA), 5 U.S.C.552(B)(6)

U.S. Department of Transportation

National Highway Traffic Safety Administration

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

FOR AGENCY USE ONLY 100148

Date Received	Repository ☐
13-DEC-2017	Reference No. 11054444
FEB 0 8 2018	

OWNER INFORMATION (Type or Print)

Name [redacted]

Address [redacted]

City ALLEGAN | State MI | Zip Code [redacted]

Daytime Telephone Number [redacted] | E-mail Address [redacted]

[redacted] mber Home

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	Model Year
JTDBL40E99[redacted]	TOYOTA	COROLLA	2009

Date Purchased	Dealer's Name and Telephone Number		Engine: No: Cylinders	Fuel Type:
2008	Spartan toyota	517-394-6000	4	GAS
Original Owner ☑	Dealer's City LANSING	State MI / Zip Code 48910		

Transmission Type		Powertrain	Multiple Failure:	Incident Date(s)
Auto	☑ Antilock Brakes ☑ Cruise Control			01-DEC-2015 01/19/2016

FAILED COMPONENT(S)/PART(S) INFORMATION

Vehicle Component Code: 140000 AIR BAGS	Failure Mileage	Failure Speed
	100000	Approx 40 MPH

ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A TIRE FAILURE

Tire Make	Tire Model (Name or Number)	Tire Size (Example P215/65R15)
Michlan's	Defender	P195/65R15 ?
DOT No. (Example: DOTMAL9ABC036)	☐ Original Equipment ☐ Prior Repair	Failure Location: ~~Allegan County~~ Van Buren County 16th Ave
Tire Component Code		Tire Failure Type: Radials

ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A CHILD SEAT FAILURE

Make: N/A	Date Manufactured:	Model No./Name:
Seat Type:	Installation System:	
Ch. 1 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	Reported to Police
☒ Yes ☐ No	☐ Yes ☒ No	1	0	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 2009 TOYOTA COROLLA. THE CONTACT STATED THAT THE VEHICLE WAS INVOLVED IN A FRONT END COLLISION. THE AIR BAGS DEPLOYED WITH FORCE AND INJURED THE DRIVER. A POLICE REPORT WAS FILED. THE VEHICLE WAS TOWED TO A COLLISION SHOP WHERE IT WAS DEEMED DESTROYED. THE MANUFACTURER WAS NOTIFIED OF THE FAILURE. A DEALER WAS NOT CONTACTED. THE DRIVER SUSTAINED A BROKEN NECK, WHICH REQUIRED MEDICAL ATTENTION. THE FAILURE MILEAGE WAS APPROXIMATELY 100,000. THE VIN WAS NOT PROVIDED.

Then Trying to stop (Little Slower maybe)

Include, if available: Police/Fire Department Report, Photos, and Repair Invoice. ATTACH ADDITIONAL SHEETS IF NECESSARY

Narrative Description of Incident(s), Failure(s), Crash(es), and Injury(ies)

My wife was driving down Road it was snow covered the edge of Road had Drop off, she lost control of car, she slid off Road hit tree, probably going 35mph the AIR bags deployed, the one on steering wheel hit her Breaking vertibra in her neck, Needed Surgery to fuse two Vertibras together. she can no longer work or drive OR three in Bad weather (scared to drive in winter) The air bag hit her in face snapped her neck back

ATTACH ADDITIONAL SHEETS IF NECESSARY

GRAND
MI 495
22 JAN '18
PM 6 L

U.S. Department of Transportation

National Highway Traffic Safety Administration

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

Official Business
Penalty for Private Use $300

NO POSTAGE NECESSARY IF MAILED IN THE UNITED STATES

BUSINESS REPLY MAIL
FIRST CLASS MAIL PERMIT NO. 1888 WASHINGTON, DC

POSTAGE WILL BE PAID BY ADDRESSEE

US Department of Transportation
National Highway Traffic Safety Administration
Office of Defects Investigation, NEF-100
1200 New Jersey Avenue SE.
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
www.nhtsa.gov

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