

DOT Auto Safety Hotline
Vehicle Owner's Questionnaire (VOQ)
 U.S. Department of Transportation
 National Highway Traffic Safety Administration
 NATIONWIDE 1-888-DASH-2-DOT
 1-888-327-4236
 www.nhtsa.dot.gov/hotline

FOR AGENCY USE ONLY 282

Date Received: SEP 11 2002

Od_or
rt_dt
od_rt
up_fr

Reference No.
8020388

Work Number

Home Number

OWNER INFORMATION (Type or Print)

MANCHESTER NJ 780010

Do you authorize NHTSA to provide a copy of report to the manufacturer of your vehicle? YES NO
 In the absence of an authorization, NHTSA WILL NOT provide your name and address to the vehicle manufacturer.
 Signature of Owner: _____ Date: 5/11/2003

VEHICLE INFORMATION

Vehicle Ident. No. (VIN) (position at front or windshield on driver's side): 1FLAP52U25A247528 Vehicle Make: FORD Vehicle Model: TAURUS Vehicle Year: 1995 Current Odometer Reading: 60,400

Purchase Date: _____ Dealer's Name: LARSON FORD Engine Size (CID/CC/L): _____ Turbo Diesel Gas Fuel Injectio
 New Used City: LAKEWOOD State: NJ Zip Code: 08701 No Cylinders: 6

Transmission Type: Manual Automatic Antilock Brakes: Yes No Restraint System: 3-Point Belt Driverside Airbag Passengerside Airbag Motorbelt 2-Point Bel Cruise Control: Yes No Drive Train: Front Rear 4-Wheel Vehicle Type: Car Van Minivan Other Sport Util Truck Motorcycle Body Style: 2-Door 4-Door Stationwagon Pick Up Truck Other

FAILED COMPONENT(S)/PART(S) INFORMATION

Component: 12111300 Part Name(s): INTERIOR SYSTEMS-PASSENGER RESTRAINTS-AIR BAG-FRONTA Location: Left Right Front Rear Failed Part(s): Original Replacement

No of Failures: _____ Date(s) of Failure(s): 09-SEP-2002 Mileage at Failure(s): 60345 Vehicle Speed at Failure(s): 30 Failed Part(s) Available? Yes No NHTSA Previously: Yes No

APPLICATION INCIDENT INFORMATION

(Please describe in detail the incident(s), Failure(s), Crash(es), and Injury(ies) on the back of this form)

Crash: Yes No Fire: Yes No Number of Persons Injured: 1 Number of Fatalities: 0 Estimated Property Damage: \$1500 TELI POLE Reported to Police: Yes No

NARRATIVE DESCRIPTION OF FAILURE(S), INCIDENT(S), INJURY(IES)

WHILE TRAVELING ABOUT 30 MPH ON THE MAIN ROAD. SHE HIT A BUMP INSIDE OF THE ROAD AND HER DUAL AIRBAGS DEPLOYED. THE DEALERSHIP IS AWARE OF THE PROBLEM. "MR Checked THREE TIMES AT DEALERSHIP — ON THE WAY TO DEALER WHEN ACCIDENT OCCURRED"

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)

I WAS SEVERELY INJURED TAKEN TO THE
HOSPITAL APPROX 5:00 PM - SMASHED INTO TELEPHONE
POLE - AT 30 MPH / AIR BAGS BLINDED ME SO I HIT THE
POLE - FULL SPEED 30 MPH -

I HAVE BEEN HANDICAPPED SINCE 9/9/2002 -

STILL NOT RECOVERED - 5/12/2003

ATTACH ADDITIONAL SHEETS IF NECESSARY

U.S. Department
of Transportation

National Highway
Traffic Safety
Administration

400 Seventh St., S.W.
Washington, D.C. 20590

Official Business
Penalty for Private Use \$300



NO POSTAGE
NECESSARY
IF MAILED
IN THE
UNITED STATES

BUSINESS REPLY MAIL

FIRST CLASS PERMIT NO 75173 WASHINGTON, D.C.

POSTAGE WILL BE PAID BY NATL. HWY. TRAFFIC SAFETY ADMIN.

U.S. Department of Transportation
National Highway Traffic Safety Administration
DOT Auto Safety Hotline, NSA-10.1
400 7th Street, SW
Washington, DC 20590



**VEHICLE
OWNER'S
QUESTIONNAIRE**

DOT AUTO SAFETY HOTLINE

TO REPORT VEHICLE SAFETY DEFECTS

COMPLETE THIS FORM

OR

DASH2DOT

and dial toll free at

1-888-DASH-2-DOT

1-888-327-4236

DOT Auto Safety Hotline
(DASH) 2 DOT



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