

U.S. Department  
of TransportationNational Highway  
Traffic Safety  
Administration

DOT Auto Safety Hotline

## Vehicle Owner's Questionnaire (VOQ)

NATIONWIDE 1-888-DASH-2-DOT

1-888-327-4236

www.nhtsa.dot.gov/hotline

FOR AGENCY USE ONLY 241

Date Received

28-AUG-2000

 Od\_or \_\_\_\_\_  
 rt\_dt \_\_\_\_\_  
 od\_rt \_\_\_\_\_  
 up\_ltr \_\_\_\_\_

Reference No.

868964

 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 \_\_\_\_/\_\_\_\_/\_\_\_\_

## VEHICLE INFORMATION

Vehicle Ident. No. (VIN.) <small>(Listed at front of windshield or driver's side)</small>	Vehicle Make	Vehicle Model	Vehicle Year	Current Odometer Reading
<b>PLEASE FILL IN</b>	MITSUBISHI	MIRAGE	1994	

Purchase Date	Dealer's Name _____	Engine Size (CID/CC/L) _____	<input type="checkbox"/> Turbo <input type="checkbox"/> Diesel <input type="checkbox"/> Gas <input type="checkbox"/> Fuel Injection
<input type="checkbox"/> New <input checked="" type="checkbox"/> Used	City _____ State _____ Zip Code _____	No. Cylinders _____	

Transmission Type	Antilock Brakes	Restraint System	Cruise Control	Drive Train	Vehicle Type	Body Style
<input type="checkbox"/> Manual <input type="checkbox"/> Automatic	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> 3-Point Belt <input type="checkbox"/> Motorbelt <input checked="" type="checkbox"/> Driverside Airbag <input type="checkbox"/> 2-Point Belt <input type="checkbox"/> Passengerside Airbag	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Front <input type="checkbox"/> Rear <input type="checkbox"/> 4-Wheel	<input type="checkbox"/> Car <input type="checkbox"/> Van <input type="checkbox"/> Minivan <input type="checkbox"/> Other _____	<input type="checkbox"/> Sport Ult <input type="checkbox"/> Truck <input type="checkbox"/> Motorcycle <input type="checkbox"/> 2-Door <input type="checkbox"/> 4-Door <input type="checkbox"/> Stationwagon <input type="checkbox"/> Pick Up Truck <input type="checkbox"/> Other _____

## FAILED COMPONENT(S)/PART(S) INFORMATION

Component 12111200	Part Name(s) INTERIOR SYSTEMS: PASSENGER RESTRAINTS: AIR BAG: FRONT A	Location <input type="checkbox"/> Left <input type="checkbox"/> Right <input type="checkbox"/> Front <input type="checkbox"/> Rear	Failed Part(s) <input type="checkbox"/> Original <input type="checkbox"/> Replacement
No. of Failures	Date(s) of Failure(s) 28-JUN-2000 Mileage at Failure(s) 52100 Vehicle Speed at Failure(s) _____	Failed Part(s) Available? <input type="checkbox"/> Yes <input type="checkbox"/> No	NHTSA Previously Contacted? <input type="checkbox"/> Yes <input type="checkbox"/> 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 <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Fire <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Number of Persons Injured 1	Number of Fatalities	Estimated Property Damage	Reported to Police <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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## NARRATIVE DESCRIPTION OF FAILURE(S), INCIDENT(S), INJURY(IES)

EA 99 007/INDAVERTENT AIR BAG DEPLOYMENT: WHILE TRAVELING ON A GRAVEL ROAD OF 20 MPH; DRIVER'S AIR BAG DEPLOYED/ REASON UNKNOWN? DRIVER RECEIVED CUTS AND BRUISES ON LEFT ARM. DEALER NOTIFIED. PLEASE PROVIDE FURTHER DETAILS. \*AK


CONTINUED ON BACK PLEASE

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.

 DOT Auto Safety Hotline <b>Vehicle Owner's Questionnaire (VOQ)</b> NATIONALWIDE 1-888-DASH-2-DOT 1-888-327-4236 www.nhtsa.dot.gov/hotline		<b>FOR AGENCY USE ONLY</b> 241 Date Received 09 OCT 12 AM 28-AUG-2000 OFFICE DEFECTS INVESTIGATION	
U.S. Department of Transportation National Highway Traffic Safety Administration		Od_or od_rt up_itr Reference No. 868964	
<b>OWNER INFORMATION (Type or Print)</b> [Redacted] 631644		Work Number Home Number	
Do you authorize NHTSA to provide a copy of report to the manufacturer of your vehicle? In the absence of a signature, your name and address to the vehicle manufacturer.		<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO Date 9/14/00	
Signature of Owner [Redacted]			
<b>VEHICLE INFORMATION</b>			
Vehicle Ident. No. (VIN) (located at bottom of windshield on driver's side) PLEASE FILL IN J43E A11A0R4063751	Vehicle Mak MITSUBISHI	Vehicle Mode MIRAGE	Vehicle Year 1994
		Current Odometer Reading 52,905	
Purchase Date 1996 <input type="checkbox"/> New <input checked="" type="checkbox"/> Used	Dealer's Name <u>Karem Mitsubishi</u> City <u>Puyallup</u> State <u>WA</u> Zip Code <u>98371</u>	Engine Siz (CID/CC/L) No Cylinders <u>4</u>	<input type="checkbox"/> Turbo <input type="checkbox"/> Diesel <input checked="" type="checkbox"/> Gas <input type="checkbox"/> Fuel Injectio
Transmission Type <input checked="" type="checkbox"/> Manual <input type="checkbox"/> Automatic	Antilock Brakes <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Restraint System <input checked="" type="checkbox"/> 3-Point Belt <input checked="" type="checkbox"/> Driverside Airbag <input type="checkbox"/> Passengerside Airbag <input type="checkbox"/> Motorbelt <input type="checkbox"/> 2-Point Bel	Cruise Control <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
		Drive Train <input type="checkbox"/> Front <input type="checkbox"/> Rear <input type="checkbox"/> 4-Wheel	Vehicle Type <input checked="" type="checkbox"/> Car <input type="checkbox"/> Van <input type="checkbox"/> Minivan <input type="checkbox"/> Other <input type="checkbox"/> Sport Ult <input type="checkbox"/> Truck <input type="checkbox"/> Motorcycle
			Body Style <input checked="" type="checkbox"/> 2-Door <input type="checkbox"/> 4-Door <input type="checkbox"/> Stationwagon <input type="checkbox"/> Pick Up <input type="checkbox"/> Truck
<b>FAILED COMPONENT(S)/PART(S) INFORMATION</b>			
Component 12111200	Part Name(s) DRIVER INTERIOR SYSTEMS: PASSENGER RESTRAINTS: AIR BAG: FRONT	Location <input checked="" type="checkbox"/> Left <input type="checkbox"/> Front <input type="checkbox"/> Right <input type="checkbox"/> Rear	Failed Part(s) <input checked="" type="checkbox"/> Original <input type="checkbox"/> Replacemen
No of Failures 1	Date(s) of Failure(s) <u>20 JUN 2000</u> Mileage at Failure(s) <u>52100</u> Vehicle Speed at Failure(s) <u>30 MPH</u>	Failed Part(s) <input type="checkbox"/> Yes <input type="checkbox"/> No	NHTSA Previously <input type="checkbox"/> Yes <input type="checkbox"/> No
<b>APPLICATION INCIDENT INFORMATION</b> (Please describe in detail the incident(s), Failure(s), Crash(es), and injury(ies) on the back of this form)			
Crash <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Fire <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Number of Persons Injured 1	Number of Fatalities 0
		Estimated Property Damag \$2,000. <u>Replacement of Airbag</u>	Reported to Polic <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
<b>NARRATIVE DESCRIPTION OF FAILURE(S), INCIDENT(S), INJURY(IES)</b>			
EA 98 007/INDAVERTENT AIR BAG DEPLOYMENT: WHILE TRAVELING ON A GRAVEL ROAD OF 20 MPH; DRIVER'S AIR BAG DEPLOYED/ REASON UNKNOWN? DRIVER RECEIVED CUTS AND BRUISES ON LEFT ARM. DEALER NOTIFIED. PLEASE PROVIDE FURTHER DETAILS. *AK			
CONTINUE ON BACK IF NEEDED			
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.			



September 15, 2000

  
National Highway Traffic Safety Administration  
400 7th St. S. W.  
Washington, DC 20590

To Whom it May Concern:

Please allow this letter to serve the purpose of recording a failed attempt to bring a safety concern to the attention of the Mitsubishi Motor Company.


On August 29, I met with Nick Green (Mitsubishi Regional Representative) to present evidence of an inappropriate and unsafe deployment of an airbag in our 1994 Mitsubishi Mirage. This automobile scraped a rock on a gravel road, the airbag deployed, and the driver was obliged to bring the car to a stop with all of the attendant confusion and surprise of an airbag in his face.

The evidence displayed showed scratches and gouges to non-frame members of the underside. The pattern and consistency of these scratches/gouges demonstrate that the car was neither stopped nor slowed to a safe speed by this encounter.

After observing the underside of the car, Rich Green presented a conclusion which could not be supported by the evidence and which differed substantially from one presented by an independent professional appraisal, as well as two others presented by the Mitsubishi service center.

The larger concern is that Mitsubishi Motor Company will not be able to enter evidence of a potential safety hazard into their data base because that evidence has been negated by a non-expert and therefore not carried to an appropriate destination.

We can go no further, except to record that on the date of 8/29/00 evidence was presented to Mitsubishi representative, Nick Green, of a possible defect which might likely lead to the loss of life due to the inappropriate deployment of an air bag. In disregard of our actual experience, evidence displayed on the vehicle itself, and an independent professional appraisal, he rendered a decision of "not valid" and failed to pass the information on.

  
cc:  
Rich Griffin, Korum Mitsubishi, Puyallup, WA  
Nick Green, Mitsubishi District Manager  
Todd Huber, Korum Mitsubishi, Puyallup, WA  
Washington State Attorney General's Office  
Mitsubishi Motor Sales Corporation Headquarters Office