Form Approved: O.M.B. No. 2127-0008

U.S. Department of Transportation
National Highway Traffic Safety Administration

Auto Safety Hotline

Vehicle Owner's Questionnaire

NATIONWIDE 1-800-424-9393
DC METRO AREA (202) 366-0123
INTERNET: http://www.nhtsa.dot.gov

FOR AGENCY USE ONLY 284

Date Received: 21-JUN-2001

Od_or ____
rt_dt ____
od_rt ____
up_ltr ____

Reference No. 890854

[redacted]

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.)	Vehicle Make	Vehicle Model	Vehicle Year	Current Odometer Readin
2G1FP22K9T2142939	CHEVROLET	CAMARO	1996	

Purchase Dat ☐ New ☒ Used

Dealer's Name ______ City ______ State ______ Zip Code ______

Engine Size (CID/CC/L) ____ No Cylinders ____ ☐ Turbo ☐ Diesel ☐ Gas ☐ Fuel Injectio

Transmission Type	Antilock Brakes	Restraint System	Cruise Contro	Drive Trai	Vehicle Type	Body Style
☐ Manual ☐ Automatic	☐ Yes ☒ No	☐ 3-Point Belt ☐ Motorbelt ☐ Driverside Airbag ☐ 2-Point Bel ☐ Passengerside Airbag	☐ Yes ☒ No	☐ Front ☐ Rear ☐ 4-Wheel	☐ Car ☐ Sport Ult ☐ Van ☐ Truck ☐ Minivan ☐ Motorcycle ☐ Other____	☐ 2-Door ☐ 4-Door ☐ Stationwagon ☐ Pick Up Truck ☐ Other____

FAILED COMPONENT(S)/PART(S) INFORMATION

Component	Part Name(s	Location	Failed Part(s
12112100	INTERIOR SYSTEMS:PASSIVE RESTRAINT:AIR BAG:SIDE DOOR	☐ Left ☐ Right ☐ Front ☐ Rear	☐ Original ☐ Replacement

No of Failure

Date(s) of Failure(s) 18-MAY-2001 65
Mileage at Failure(s) 45

Failed Part(s) ☐ 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	Fire	Number of Persons Injured	Number of Fatalitie	Estimated Property Damag	Reported to Polic
☒ Yes ☐ No	☐ Yes ☒ No	2			☐ Yes ☒ No

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

WHILE DRIVING AT 45 MPH CONSUMER WAS INVOLVED IN A FRONTAL CRASH. UPON IMPACT, BOTH DRIVER'S SIDE AND PASSENGER'S SIDE AIR BAGS FAILED TO DEPLOY. BOTH DRIVER AND PASSENGER SUFFERED MINOR INJURIES. VEHICLE WAS TOTALED. PLEASE PROVIDE ADDITIONAL INFORMATION. *AK

CONTINUE ON BACK IF NEEDED

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U.S. Department of Transportation
National 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

01 JUL 18 AM 9:19
OFFICE OF DEFECTS INVESTIGATION

FOR AGENCY USE ONLY 284

RECEIVED

Date Received: 21-JUN-2001

Od_or
rt_dt
od_rt
up_ltr

Reference No. 890854

OWNER INFORMATION (Type or Print)

[redacted] 698226

Work Num [redacted]
Home Num

Do you consent to provide a copy of this 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 Ow[redacted] Date 07/02/01

VEHICLE INFORMATION

Vehicle Ident. No. (VIN.) (Located at bottom of windshield on driver's side)	Vehicle Make	Vehicle Model	Vehicle Year	Current Odometer Reading
2G1FP22K9T2142939	CHEVROLET	CAMARO	1996	46,969

Purchase Date: 4-00 ☐ New ☒ Used

Dealer's Name _____
City _____ State _____ Zip Code _____

Engine Size (CID/CC/L) _____
No Cylinders _____

☐ Turbo ☐ Diesel ☐ Gas ☐ Fuel Injection

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

FAILED COMPONENT(S)/PART(S) INFORMATION

Component	Part Name(s)	Location	Failed Part(s)
1211210	INTERIOR SYSTEMS:PASSIVE RESTRAINT:AIR BAG:SIDE DOOR	☐ Left ☐ Right ☐ Front ☐ Rear	☑ Original ☐ Replacement

No of Failures		Failed Part(s) Available?	NHTSA Previously Contacted?
	Date(s) of Failure(s) 18-MAY-2001 Mileage at Failure(s) ~65 ~46969 PR Vehicle Speed at Failure(s) 45	☑ Yes ☐ No	☐ 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	Fire	Number of Persons Injured	Number of Fatalities	Estimated Property Damage	Reported to Police
☒ Yes ☐ No	☐ Yes ☒ No	4 PR			☑ Yes ☒ No PR

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

WHILE DRIVING AT 45 MPH CONSUMER WAS INVOLVED IN A FRONTAL CRASH. UPON IMPACT, BOTH DRIVER'S SIDE AND PASSENGER'S SIDE AIR BAGS FAILED TO DEPLOY. BOTH DRIVER AND PASSENGER SUFFERED MINOR INJURIES. VEHICLE WAS TOTALED. PLEASE PROVIDE ADDITIONAL INFORMATION. *AK

CONTINUE ON BACK IF NEEDED

Fold to show Return Address (no stamp needed) Fasten with tape or staple and mail

INFORMATION ON TIRE FAILURE(S) (IF APPLICABLE)

TIRE IDENTIFICATION NO.*

D	O	T	M	K	I	8	F	X	J	R	I	9	MANUFACTURER/TIRE NAME	SIZE
													DD Ford Rear	Front P235/55R16

* The identification number consists of 7 to 10 letters and numerals following the letters DOT. It is usually located near the rim flange on the side opposite the whitewall or on either side of a blackwall tire.

NARRATIVE DESCRIPTION (CONTINUED)

The road was slightly damp and the car started fishtailing tried to stop the car but it seemed to have gained speed instead of slowing down. It started going around in circles and front end hit embankment - throught it around and back end went into a deep ditch - put it back out into road where it bottomed out and stopped. The seat belts broke from roof of car and neither air bags employed. Front of car was pushed back into motor area. front fenders are over tires. Head latch broke from frame - Rear springs were torn from car. Back end smashed up over wheels - front end also over wheels. Left rear tire flattened (drivers side) when car came to stop - Hatch flew up - Hood was open, Front seats were broken rear seats came loose. Doors were jammed shut.

★ U.S. G.P.O.: 1992 - 625-897 / 80086

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

LEXINGTON

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POSTAGE WILL BE PAID BY NATL HWY TRAFFIC SAFETY ADMIN.

U.S. Department of Transportation
National Highway Traffic Safety Administration
Information Management Staff NSA-10.01
400 7th Street, SW
Washington, DC 20590