



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 125

Date Received

17-JUL-2001

Od_or _____
rt_dt _____
pd_rt _____
rp_lr _____

Reference No.

892979

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) (Locate at bottom of windshield or driver's side door)	Vehicle Make	Vehicle Model	Vehicle Year	Current Odometer Reading
SAJGGX2049XC03252	JAGUAR	XK8	1999	
Purchase Date ☐ New ☒ Used	Dealer's Name _____ City _____ State _____ Zip Code _____		Engine Size (CID/CC/L) _____ No Cylinders _____	☐ Turbo ☐ Diesel ☐ Gas ☐ Fuel Injection
Transmission Type ☐ Manual ☐ Automatic	Antilock Brakes ☐ Yes ☒ No	Restraint System ☐ 3-Point Belt ☐ Motorbelt ☐ Driverside Airbag ☐ 2-Point Bel ☒ Passengerside Airbag	Cruise Control ☐ Yes ☒ No	Drive Train ☐ Front ☐ Rear ☐ 4-Wheel
Vehicle Type ☐ Car ☐ Sport Util ☐ Van ☐ Truck ☐ Minivan ☐ Motorcycle ☐ Other _____		Body Style ☐ 2-Door ☐ 4-Door ☐ Stationwagon ☐ Pick Up Truck ☐ Other _____		

FAILED COMPONENT(S)/PART(S) INFORMATION

Component 12112300	Part Name(s) INTERIOR SYSTEMS:PASSIVE RESTRAINT:AIR BAG:SIDE DOOR:P	Location ☐ Left ☐ Right ☐ Front ☐ Rear	Failed Part(s) ☐ Original ☐ Replacement
No of Failure	Date(s) of Failure(s) _____ Mileage at Failure(s) _____	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 ☒ Yes ☐ No	Fire ☐ Yes ☒ No	Number of Persons Injured 1	Number of Fatalities	Estimated Property Damag	Reported to Police ☐ Yes ☒ No
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NARRATIVE DESCRIPTION OF FAILURE(S), INCIDENT(S), INJURY(IES)

VEHICLE WAS INVOLVED IN A 15 MPH COLLISION HITTING A TREE IN WHICH PASSENGER'S SIDE AIR BAG DEPLOYED, CAUSING PASSENGER TO RECEIVE FACE BURNS AND A FRACTURED ARM. PLEASE GIVE ANY FURTHER DETAILS.*AK

COPIES OF THIS FORM ARE:

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.



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

1-888-327-4235

www.nhtsa.dot.gov/hotline

FOR AGENCY USE ONLY 125

Date Received

17 JUL 2001

Old or

rt dt

od rt

up ltr

Reference No.

892979

Work Number

Home Number

OWNER INFORMATION (Type or Print)

702940

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 8/9/2001

VEHICLE INFORMATION

Vehicle Ident. No. (VIN) (located at bottom of windshield on driver's side)	Vehicle Make	Vehicle Model	Vehicle Year	Current Odometer Reading
SAJGGX2049XC03252	JAGUAR	XK8	1999	

Purchase Date

Dealer's Name

Warren Henry

Engine Size

(CID/CC/L) 8 cyl

☐ Turbo☐ Diesel☒ Gas☐ Fuel Injection☐ New ☒ Used

City Ft. Myers State FLA Zip Code 33180

No Cylinders

Transmission Type

Antilock Brakes

Restraint System

Cruise Control

Drive Train

Vehicle Type

Body Style

☐ Manual☐ Yes☐ 3-Point Belt☐ Motorbelt☒ Yes☒ Front☐ Sport Ult☒ 2-Door☒ Automatic☒ No☐ Underside Airbag☐ 2-Point Belt☐ No☐ Rear☐ Truck☐ 4-Door☒ Passengerside Airbag☐ Minivan☐ Motorcycle☐ Stationwagon☐ Other☐ Pick Up Truck☐ Other

FAILED COMPONENT(S)/PART(S) INFORMATION

Component 12112300	Part Name(s) INTERIOR SYSTEMS: PASSIVE RESTRAINT: AIR BAG: SIDE DOOR: P	Location ☐ Left ☒ Right ☐ Front ☐ Rear	Failed Part(s) ☒ Original ☐ Replacement
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No of Failures

Date(s) of Failure(s)

March 3, 2001

Mileage at Failure(s)

Vehicle Speed at Failure(s)

Failed Part(s)

Available?

☐ Yes ☒ No

NHTSA Previously

Contacted?

☐ 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 Car damaged 20,000	Reported to Police ☒ Yes ☐ No
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NARRATIVE DESCRIPTION OF FAILURE(S), INCIDENT(S), INJURY(IES)

VEHICLE WAS INVOLVED IN A 15 MPH COLLISION HITTING A TREE IN WHICH PASSENGER'S SIDE AIR BAG DEPLOYED, CAUSING PASSENGER TO RECEIVE FACE BURNS AND A FRACTURED ARM. PLEASE GIVE ANY FURTHER DETAILS. AK

plate had to be put in arm to support the horse.

CONTINUE ON BACK IF NEEDED

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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

MANUFACTURER/TIRE NAME

SIZE

* 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)

I reported this because I feel that
a car jury at this low mileage deployed
bags too harsh and did too much
damage to passengers in the front
seat of vehicle.

Jaguar never answered two letters
I sent telling them about this, not
to sue them but trying to make
them aware of the damage their
airbags can inflict on a passenger
that wasn't even in a high
speed or collision.

☆ U.S. G.P.O. 1983-622-827 / 80088

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. 73173 WASHINGTON, D.C.

POSTAGE WILL BE PAID BY NHTL 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

THE FOLLOWING PAGES ARE WITHHELD TO
PROTECT UNWARRANTED INVASION OF
PERSONAL PRIVACY PURSUANT TO
EXEMPTION 6 OF THE FREEDOM OF
INFORMATION ACT, 5 U.S.C. 552(b)(6)

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