



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

AUTO SAFETY HOTLINE
CHILD SAFETY SEAT QUESTIONNAIRE

NATIONWIDE 1-800-424-9393
DC METRO AREA (202) 366-0123

REFERENCE NUMBER

DATE RECEIVED

OWNER INFORMATION (Type or Print)

LAST NAME	FIRST NAME AND MIDDLE INITIAL	HOME	WORK PHONE
STREET ADDRESS	CITY	STATE	ZIP CODE
SIGNATURE OF OWNER			DATE

CHILD INFORMATION

CHILD'S NAME	AGE	HEIGHT/LENGTH	WEIGHT
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CHILD SAFETY SEAT INFORMATION

MANUFACTURER	MODEL NUMBER/NAME	DATE MANUFACTURED
SEAT WAS <input type="checkbox"/> Purchased <input type="checkbox"/> Obtained through loaner program <input type="checkbox"/> Gift	SEAT WAS OBTAINED <input type="checkbox"/> New <input type="checkbox"/> Used	DATE SEAT OBTAINED

VEHICLE INFORMATION

MAKE OF VEHICLE	MODEL OF VEHICLE	YEAR OF VEHICLE
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ACCIDENT INFORMATION (If applicable)

ACCIDENT? <input type="checkbox"/> Yes <input type="checkbox"/> No	NUMBER INJURED	NUMBER FATALITIES	POLICE REPORT FILED? <input type="checkbox"/> Yes <input type="checkbox"/> No
CHILD SEAT LOCATION: <input type="checkbox"/> Front <input type="checkbox"/> Rear	<input type="checkbox"/> Right <input type="checkbox"/> Left	<input type="checkbox"/> Center	FACING DIRECTION: <input type="checkbox"/> Forward <input type="checkbox"/> Backward

DESCRIBE PROBLELM/DEFECT IN DETAIL (state method of securing child and seat)

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.

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

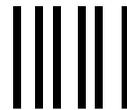
NARRATIVE DESCRIPTION *(Continued)*:

Multiple horizontal lines for narrative description.

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

U.S. Department
of Transportation
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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 NATL. HWY. TRAFFIC SAFETY ADMIN.

U.S. Department of Transportation
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Auto Safety Hotline, NEF-11 HL
400 7th St., S.W.
Washington, D.C. 20590

