



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

Child Safety Seat Questionnaire

To report a complaint, defect or incident

VEHICLE SAFETY HOTLINE

Nationwide: 1-888-327-4236 / DC Metro area: 202-366-0123

To submit by Fax: 202-366-3171 ☐☐

FOR AGENCY USE ONLY

Date Received

od-or ____
rt-dt ____
od-rt ____
up-ltr ____

Reference No.

OWNER INFORMATION (Type or Print)

NAME and ADDRESS

DAY TIME TELEPHONE NO. (AREA CODE)

Do you authorize NHTSA to provide a copy of this information to the manufacturer of your Child Safety Seat? YES NO
In the absence of an authorization, NHTSA WILL NOT provide your name and address to the vehicle manufacturer.

CHILD INFORMATION

Any Special Information

Age

Height/Length

Weight

CHILD SAFETY SEAT INFORMATION (As identified on the manufacturing label on the seat)

Seat Manufacturer

Date Manufactured

Seat Name and Model Number

Type of Child Safety Seat

Infant Booster Integrated Convertible Other

Failed Part. Describe Failure Below.

Base Harness/Buckle Shell Handle Material Padding
 LATCH Connector Tether Other

Seat Was:

Purchased New Used
 Obtained through loaner program
 Gift
 Borrowed Date ____/____/____

Purchased From:

City _____ State _____

Installed in Vehicle by the:

Vehicle Safety Belt
 LATCH System (vehicle information required)

VEHICLE INFORMATION

Make of Vehicle

Model of Vehicle

Year of Vehicle

INCIDENT INFORMATION (If applicable)

Crash?

Yes No

Number of Injured

Number of Fatalities

Police Report Filed

Yes No

Child Seat Location:

Front Right
 Rear Left Center

Safety Belt System Used

Lap Shoulder Both

Facing Direction:

Forward Rear

DESCRIBE INCIDENT/DEFECT IN DETAIL (Please explain how the Child Seat failed)

CONTINUE ON BACK IF NEEDED

The Privacy Act of 1974—Public Law 93-579 This information is requested pursuant to authority vested in Chapter 301 of Title 49 of the United States Code. 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):

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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

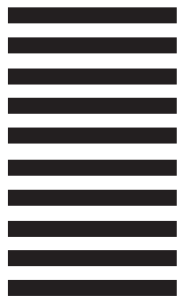


NO POSTAGE
NECESSARY
IF MAILED
IN THE
UNITED STATES

BUSINESS REPLY MAIL
FIRST CLASS PERMIT NO 73173 WASHINGTON, D.C.

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

**U.S. Department of Transportation
National Highway Traffic Safety Administration
Office of Defects Investigation (NVS-216)
400 7th Street, S.W.
Washington, DC 20590**



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