

# ATTACHMENT C4

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United States Department of  
Transportation  
National Highway Traffic Safety  
Administration

## INTERVIEW FORM RESTRAINTS (3/10/11 Draft)

Form Approved O.M.B. No. 2127-0642  
Expiration Date: xxxx  
National Automotive Sampling System  
National Child Restraint Use - Special Study

1. Primary Sampling Unit Number: _____	2. Site Number: _____
3. Observation Number: _____ / _____	4. Date of Observation: _____ / _____ /2011
5. <b>(Circle for Only One Child--the child being observed)</b> _____ 12 13 (1 <sup>st</sup> row: __, middle, right) 21 22 23 (2 <sup>nd</sup> row: left; middle, right) 31 32 33 (3 <sup>rd</sup> row: left; middle, right) Other _____  <b>For the child safety seat or booster in SP _____:</b> 6. What is the make of this seat? _____ 7. What is the model? 1 _____ 2 <input type="radio"/> DK 3 <input type="radio"/> Refused 4 <input type="radio"/> DA	1. <input type="radio"/> Baby Trend 2. <input type="radio"/> Britax 3. <input type="radio"/> Chicco 4. <input type="radio"/> Combi 5. <input type="radio"/> Cosco 6. <input type="radio"/> Cybex 7. <input type="radio"/> Dorel 8. <input type="radio"/> Eddie Bauer 9. <input type="radio"/> Evenflo  10. <input type="radio"/> Graco 11. <input type="radio"/> Maxi Cosi 12. <input type="radio"/> Learning Curve-1st Yrs. 13. <input type="radio"/> Magna/Clek 14. <input type="radio"/> Mia Moda 15. <input type="radio"/> Orbit 16. <input type="radio"/> Peg Perego 17. <input type="radio"/> Recaro  18. <input type="radio"/> Safety 1st 19. <input type="radio"/> Safe Traffic Systems 20. <input type="radio"/> Summer 21. <input type="radio"/> Sunshine Kids 22. <input type="radio"/> DK 23. <input type="radio"/> Refused 24. <input type="radio"/> DA 25. <input type="radio"/> Other _____
8. How long have you had this seat?	1 Yrs _____ 2 Months _____ 3 <input type="radio"/> DK 4 <input type="radio"/> Refused 5 <input type="radio"/> DA
9. Did you get it new or used?	1 <input type="radio"/> New 2 <input type="radio"/> Used 3 <input type="radio"/> DK 4 <input type="radio"/> Refused 5 <input type="radio"/> DA
10. Did you read the instructions for installing this SEAT that came.....? <b>(Read, randomizing order; Select all that apply)</b>	1. <input type="checkbox"/> On the box for the car seat 2. <input type="checkbox"/> On the label of the car seat 3. <input type="checkbox"/> In the owner's manual for the car seat 4. <input type="checkbox"/> In the owner's manual for the vehicle 5. <input type="radio"/> DK, Ref, or DA <b>(Circle one)</b>
11. Has this seat been checked or inspected at a seat check or by a certified passenger safety technician (CPST)? <b>(If 2, 3, 4, or 5 answered, Skip to Q14)</b>	1 <input type="radio"/> Yes 2 <input type="radio"/> No 3 <input type="radio"/> DK 4 <input type="radio"/> Refused 5 <input type="radio"/> DA
12. How long ago was it (last) checked? <b>(If 3, 4, or 5 answered, Skip to Q14)</b>	1 Yrs _____ 2 Months _____ 3 <input type="radio"/> DK 4 <input type="radio"/> Refused 5 <input type="radio"/> DA
13. Has it been moved since it was (last) checked?	1 <input type="radio"/> Yes 2 <input type="radio"/> No <b>(Skip to Q15)</b> 3 <input type="radio"/> DK 4 <input type="radio"/> Refused 5 <input type="radio"/> DA
For how long has this seat (and its base) been installed in the current SP without being uninstalled or moved?	1 Yrs _____ 2 Months _____ 3 Days _____ <b>(If Yrs &amp; Mon = 0)</b> 4 <input type="radio"/> DK 5 <input type="radio"/> Refused 6 <input type="radio"/> DA
14. On a scale from 1 to 5 with 1= Not Confident & 5= Very Confident, how confident are you that it was installed correctly?	1 Scale: 1-----2-----3-----4-----5 2 <input type="radio"/> DK 3 <input type="radio"/> Refused 4 <input type="radio"/> DA <b>(Not Confident) (Very Confident)</b>
15. Today, who put this child in his/her seat?	1 <input type="radio"/> Self 2 <input type="radio"/> Joint w/other 3 <input type="radio"/> Partner/spouse/significant other 4 <input type="radio"/> Parent or other family member 5 <input type="radio"/> Friend or neighbor 6 <input type="radio"/> Child 7 <input type="radio"/> CPST 8 <input type="radio"/> DK 9 <input type="radio"/> Refused 10 <input type="radio"/> DA 10 <input type="radio"/> Other _____
<b>FOR BELT POSITIONING BOOSTER SEATS, SKIP TO Q46; OTHERWISE CONTINUE</b>	
16. Some seats have a strap on the back of the seat near the top called a tether. Does your seat have a tether strap?	1 <input type="radio"/> Yes 2 <input type="radio"/> No 3 <input type="radio"/> DK 4 <input type="radio"/> Refused 5 <input type="radio"/> DA
17. For SP _____, does your vehicle have a place to hook the seat top tether strap? <b>(If "no" to either Q16 or Q17, Skip to Q25)</b>	1 <input type="radio"/> Yes 2 <input type="radio"/> No 3 <input type="radio"/> DK 4 <input type="radio"/> Refused 5 <input type="radio"/> DA
18. Are you using the tether?	1 <input type="radio"/> Yes <b>(Skip to Q21)</b> 2 <input type="radio"/> No 3 <input type="radio"/> DK 4 <input type="radio"/> Refused 5 <input type="radio"/> DA
19. <b>(If no)</b> What is the main reason that you are not using the tether? <b>(Skip to Q25)</b>	1 <input type="radio"/> DK about it 2 <input type="radio"/> Didn't think it was important 3 <input type="radio"/> DK how to use it 4 <input type="radio"/> Too hard to use 5 <input type="radio"/> RF seat 6 <input type="radio"/> Over weight limit 7 <input type="radio"/> Can't find 8 <input type="radio"/> Refused 9 <input type="radio"/> DA 10 <input type="radio"/> Other: _____
20. <b>(If yes)</b> What is the main reason that you are using the tether?	1 <input type="radio"/> Law 2 <input type="radio"/> Safer 3 <input type="radio"/> Instructions 4 <input type="radio"/> DK 5 <input type="radio"/> Refused 6 <input type="radio"/> DA 7 <input type="radio"/> Other: _____
21. Who attached the tether? <b>(If any item from 3-10 is answered, Skip to Q25)</b>	1 <input type="radio"/> Self 2 <input type="radio"/> Joint w/other 3 <input type="radio"/> Partner/spouse/significant other 4 <input type="radio"/> Parent or other family member 5 <input type="radio"/> Friend or neighbor 6 <input type="radio"/> CPST 7 <input type="radio"/> DK 8 <input type="radio"/> Refused 9 <input type="radio"/> DA 10 <input type="radio"/> Other
22. On a scale from 1 to 5 with 1= Very Difficult & 5= Very Easy, how difficult or easy did you find it to:	1-----2-----3-----4-----5 <b>(Very Difficult) (Very Easy)</b> 1--1 <input type="radio"/> Scale #: _____ 2 <input type="radio"/> DK 3 <input type="radio"/> Refused 4 <input type="radio"/> DA 2--1 <input type="radio"/> Scale #: _____ 2 <input type="radio"/> DK 3 <input type="radio"/> Refused 4 <input type="radio"/> DA

1. Attach the tether? 2. Get a tight fit?	
23. Have you ever disconnected this tether? <i>(If any item from 2-5, Skip to Q25)</i>	1 <input type="radio"/> Yes 2 <input type="radio"/> No 3 <input type="radio"/> DK 4 <input type="radio"/> Refused 5 <input type="radio"/> DA
24. On a scale from 1 to 5 with 1= Very Difficult & 5= Very Easy, how difficult or easy did you find it to disconnect the tether?	1 <input type="radio"/> Scale #: _____ 2 <input type="radio"/> DK 3 <input type="radio"/> Refused 4 <input type="radio"/> DA
25. Some seats have 2 straps/attachments on the bottom called lower anchor straps/attachments. Does this seat have lower straps/attachments to connect or hook it to the vehicle?	1 <input type="radio"/> Yes 2 <input type="radio"/> No 3 <input type="radio"/> DK 4 <input type="radio"/> Refused 5 <input type="radio"/> DA
26. For SP ____, does your vehicle have lower anchors? <i>(If "no" to either Q25 or Q26, Skip to Q36)</i>	1 <input type="radio"/> Yes 2 <input type="radio"/> No 3 <input type="radio"/> DK 4 <input type="radio"/> Refused 5 <input type="radio"/> DA
27. Are you using the lower straps/attachments with the lower anchors?	1 <input type="radio"/> Yes <i>(Skip to Q30)</i> 2 <input type="radio"/> No 3 <input type="radio"/> DK 4 <input type="radio"/> Refused 5 <input type="radio"/> DA
28. <i>(If no)</i> What is the main reason that you are not using the lower straps/attachments with the lower anchors? <i>(Skip to Q36)</i>	1 <input type="radio"/> DK about it 2 <input type="radio"/> Didn't think it was important 3 <input type="radio"/> DK how to use it 4 <input type="radio"/> Too hard to use 5 <input type="radio"/> RF seat 6 <input type="radio"/> Over weight limit 7 <input type="radio"/> Can't find 8 <input type="radio"/> Refused 9 <input type="radio"/> DA 10 <input type="radio"/> Other: _____
29. <i>(If yes)</i> What is the main reason that you are using them?	1 <input type="radio"/> Law 2 <input type="radio"/> Safer 3 <input type="radio"/> Instructions 4 <input type="radio"/> DK 5 <input type="radio"/> Refused 6 <input type="radio"/> DA 7 <input type="radio"/> Other: _____
30. Who installed the seat with the lower anchors? <i>(If any item from 3-10 is answered, Skip to Q34)</i>	1 <input type="radio"/> Self 2 <input type="radio"/> Joint w/other 3 <input type="radio"/> Partner/spouse/significant other 4 <input type="radio"/> Parent or other family member 5 <input type="radio"/> Friend or neighbor 6 <input type="radio"/> CPST 7 <input type="radio"/> DK 8 <input type="radio"/> Refused 9 <input type="radio"/> DA 10 <input type="radio"/> Other
31. On a scale from 1 to 5 with 1= Very Difficult & 5= Very Easy, how difficult or easy did you find it to: 1. Install this seat using the lower anchors? 2. Get a tight fit?	<b>1-----2-----3-----4-----5</b> <b>(Very Difficult) (Very Easy)</b> 1--1 <input type="radio"/> Scale #: _____ 2 <input type="radio"/> DK 3 <input type="radio"/> Refused 4 <input type="radio"/> DA 2--1 <input type="radio"/> Scale #: _____ 2 <input type="radio"/> DK 3 <input type="radio"/> Refused 4 <input type="radio"/> DA
32. Have you ever uninstalled this seat after it had been installed with lower anchors? <i>(If any item from 2-5, Skip to Q34)</i>	1 <input type="radio"/> Yes 2 <input type="radio"/> No 3 <input type="radio"/> DK 4 <input type="radio"/> Refused 5 <input type="radio"/> DA
33. On a scale from 1 to 5 with 1= Very Difficult & 5= Very Easy, how difficult or easy did you find it to unInstall the seat (when using the lower anchors)?	1 <input type="radio"/> Scale #: _____ 2 <input type="radio"/> DK 3 <input type="radio"/> Refused 4 <input type="radio"/> DA
34. Are you also using the safety belt to attach the seat?	1 <input type="radio"/> Yes 2 <input type="radio"/> No 3 <input type="radio"/> DK 4 <input type="radio"/> Refused 5 <input type="radio"/> DA <i>(If 2-5, Skip to Q44)</i>
35. What is the main reason that you use both (i.e., SB and the lower anchors)? <i>(Skip to Q39)</i>	1 <input type="radio"/> Extra secureness or safety 2 <input type="radio"/> Believed it was necessary 3 <input type="radio"/> DK 4 <input type="radio"/> Refused 5 <input type="radio"/> DA 5 <input type="radio"/> Other: _____
36. Are you using the SB to attach the seat to the vehicle?	1 <input type="radio"/> Yes <i>(Skip to Q39)</i> 2 <input type="radio"/> No 3 <input type="radio"/> DK 4 <input type="radio"/> Refused 5 <input type="radio"/> DA
37. <i>(If no)</i> What is the main reason that you are not using the SB? <i>(Skip to Q42)</i>	1 <input type="radio"/> DK about it 2 <input type="radio"/> Didn't think it was important 3 <input type="radio"/> DK how to use it 4 <input type="radio"/> Too hard to use 5 <input type="radio"/> RF seat 6 <input type="radio"/> Over weight limit 7 <input type="radio"/> Can't find 8 <input type="radio"/> Refused 9 <input type="radio"/> DA 10 <input type="radio"/> Other: _____
38. <i>(If yes)</i> What is the main reason that you are using the SB?	1 <input type="radio"/> Law 2 <input type="radio"/> Safer 3 <input type="radio"/> Instructions 4 <input type="radio"/> DK 5 <input type="radio"/> Refused 6 <input type="radio"/> DA 7 <input type="radio"/> Other: _____
39. Who installed the seat with the SB? <i>(If any item from 3-10 is answered, Skip to Q43)</i>	1 <input type="radio"/> Self 2 <input type="radio"/> Joint w/other 3 <input type="radio"/> Partner/spouse/significant other 4 <input type="radio"/> Parent or other family member 5 <input type="radio"/> Friend or neighbor 6 <input type="radio"/> CPST 7 <input type="radio"/> DK 8 <input type="radio"/> Refused 9 <input type="radio"/> DA 10 <input type="radio"/> Other
40. On a scale from 1 to 5 with 1= Very Difficult & 5= Very Easy, how difficult or easy did you find it to: 1. Install this seat using the seat belt? 2. Get a tight fit?	<b>1-----2-----3-----4-----5</b> <b>(Very Difficult) (Very Easy)</b> 1--1 <input type="radio"/> Scale #: _____ 2 <input type="radio"/> DK 3 <input type="radio"/> Refused 4 <input type="radio"/> DA 2--1 <input type="radio"/> Scale #: _____ 2 <input type="radio"/> DK 3 <input type="radio"/> Refused 4 <input type="radio"/> DA
41. Have you ever uninstalled this seat after it had been installed with the seat belt? <i>(If any item from 2-5, Skip to Q43)</i>	1 <input type="radio"/> Yes 2 <input type="radio"/> No 3 <input type="radio"/> DK 4 <input type="radio"/> Refused 5 <input type="radio"/> DA
42. On a scale from 1 to 5 with 1= Very Difficult & 5= Very Easy, how difficult or easy did you find it to unInstall the seat when using the seat belt? :	1 <input type="radio"/> Scale #: _____ 2 <input type="radio"/> DK 3 <input type="radio"/> Refused 4 <input type="radio"/> DA
43. Have you ever used any of the following with this or another child safety seat in this vehicle? <i>(If "NO" TO Q43.2 OR Q43.3, SKIP TO Q47)</i>	1. Tether Anchor? 1 <input type="radio"/> Yes 2 <input type="radio"/> No 3 <input type="radio"/> DK 4 <input type="radio"/> Refused 5 <input type="radio"/> DA 2. Lower Anchors (LA)? 1 <input type="radio"/> Yes 2 <input type="radio"/> No 3 <input type="radio"/> DK 4 <input type="radio"/> Refused 5 <input type="radio"/> DA 3. Seat Belt (SB) 1 <input type="radio"/> Yes 2 <input type="radio"/> No 3 <input type="radio"/> DK 4 <input type="radio"/> Refused 5 <input type="radio"/> DA
44. Do you prefer LA or SB?	1 <input type="radio"/> LA 2 <input type="radio"/> SB 3 <input type="radio"/> Undecided 4 <input type="radio"/> DK 5 <input type="radio"/> Refused 6 <input type="radio"/> DA
45. Is it easier to attach a seat to the vehicle with the lower anchors or vehicle safety belt?	1 <input type="radio"/> LA 2 <input type="radio"/> SB 3 <input type="radio"/> Undecided 4 <input type="radio"/> DK 5 <input type="radio"/> Refused 6 <input type="radio"/> DA

46. If you have ever driven somewhere when a child in the vehicle was not secured in a child safety seat or booster, describe the primary reason	1 <input type="radio"/> Never have    2 <input type="radio"/> Short trip    3 <input type="radio"/> Child unbuckled self 4 <input type="radio"/> No seat/booster in vehicle    5 <input type="radio"/> Forgot to check 6 <input type="radio"/> Too many passengers in the vehicle 7 <input type="radio"/> Child does not cooperate    8 <input type="radio"/> Don't know 9 <input type="radio"/> Refused    10 <input type="radio"/> DA    11 <input type="radio"/> Other _____				
47. Gender (Do by Observation)	1 <input type="radio"/> Male    2 <input type="radio"/> Female				
48. Are you of Hispanic or Latino origin?	1 <input type="radio"/> Yes    2 <input type="radio"/> No    3 <input type="radio"/> DK    4 <input type="radio"/> Refused    5 <input type="radio"/> DA				
49. Which of the following best describes your race? (Select all that apply)	1 <input type="radio"/> White    2 <input type="radio"/> Black or African American    3 <input type="radio"/> Asian 4 <input type="radio"/> Native Hawaiian/Other Pacific Islander    5 <input type="radio"/> American Indian/Alaska Native 6 <input type="radio"/> Refused    7 <input type="radio"/> DA    8 <input type="radio"/> Other: _____				
50. Do you mind telling me your age?	1 <input type="radio"/> Don't Mind: _____ (Years)    2 <input type="radio"/> Do Mind				
51. <b>(Skip if Q50 answered)</b> Would you prefer to point to your age range?	1 <input type="radio"/> 13-19 2 <input type="radio"/> 20-29	3 <input type="radio"/> 30-39 4 <input type="radio"/> 40-49	5 <input type="radio"/> 50-59 6 <input type="radio"/> 60-69	7 <input type="radio"/> 70-79 8 <input type="radio"/> 80+	9 <input type="radio"/> DK 10 <input type="radio"/> Refused 11 <input type="radio"/> DA
52. Interview completed: 1 <input type="radio"/> Yes    2 <input type="radio"/> No	53. Time Completed: _____				