

EPDS 20 88

JC-21

CONSUMER PRODUCT INCIDENT REPORT

1. NAME OF RESPONDENT [REDACTED]	2. TELEPHONE NO. (Home) (Work) [REDACTED]
3. STREET ADDRESS [REDACTED]	4. CITY STATE ZIP CODE Eden Prairie, MN 55346

5. DESCRIBE ACCIDENT SITUATION OR HAZARD, INCLUDING DATA ON INJURIES. (Use second page if necessary.)

The respondent was using a glass baking dish to bake cranberry bread. The bread was baking in an electric oven where another type of bread was also being baked. The breads had baked for an hour at 350 degrees. The respondent was standing at the oven preparing to remove the breads when the one glass baking dish exploded, spraying glass through out the oven. The dish that exploded had been purchased the day before and was being used for the first time.

The respondent said she washed the dish before using it. She said the dish did not have any chips or cracks. She feels that these dishes could cause serious injury.

6. DATE OF INCIDENT(S) 1-30-92	7. IF INJURY OR NEAR MISS, OBTAIN AGE _____ SEX _____ AND DESCRIBE INJURY _____	8. IF VICTIM DIFFERENT FROM RESPONDENT, PROVIDE NAME _____ RELATIONSHIP _____
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9. DESCRIPTION OF PRODUCT amber glass loaf baking dish	10. BRAND NAME Great Cooks (Oven basics loaf dish)
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11. MANUFACTURER/DISTRIBUTOR NAME, ADDRESS & PHONE Anchor Hocking Lancaster, OHIO	12. MODEL SERIAL NO.'S M1041L	13. DEALER'S NAME, ADDRESS & PHONE Target Eden Prairie, MN
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14. WAS THE PRODUCT DAMAGED, REPAIRED OR MODIFIED? YES _____ NO <u>X</u> IF YES, BEFORE OR AFTER THE INCIDENT? Describe _____	15. PRODUCT PURCHASED NEW <u>X</u> USED _____ DATE PURCHASED 1-29-92 AGE 1st use	16. DOES PRODUCT HAVE WARNING LABELS? Yes IF SO, NOTE: Avoid impact, don't use if scratched, chipped or cracked.
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17. HAVE YOU CONTACTED THE MANUFACTURER? YES <u>X</u> NO _____ IF NOT, DO YOU PLAN TO CONTACT THEM? YES _____ NO _____ OTHER _____	18. IS THE PRODUCT STILL AVAILABLE? YES <u>X</u> NO _____ IF NOT, ITS DISPOSITION _____	19. MAY WE USE YOUR NAME WITH THIS REPORT? YES <u>X</u> NO _____
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FOR ADMINISTRATION USE

20. DATE RECEIVED 1-31-92	21. RECEIVED BY (Name & Office) Carolyn A. Schultz, MSP-RP	22. DOCUMENT NO. G 9220089A 0089A
23. FOLLOW-UP ACTION EIF NOTIFIED No Comments made Comments attached Excisions/Revisions Firm has not requested further notice	24. PRODUCT CODE(S) 0461	25. DISTRIBUTION FOUR, EPDS
26. ENDORSER'S NAME & TITLE Eric Blunt, Regional Director		

M J

If you have any changes, additions, or comments you wish to make concerning your attached report, please make them in the space below.

ANCHOR HOCKING TELEPHONED ME. THEY WANTED THE REMAINING PIECES OF THE DISH - WHICH I SENT THEM. THEY ALSO SENT ME A CHECK FOR \$3000 FOR TIME AND TROUBLE.

AS FAR AS I AM CONCERNED, THE MATTER HAS BEEN SETTLED.

HOPEFULLY, THEY WILL FIND A CAUSE FOR THE INCIDENT, AND IT CAN BE CORRECTED.

I confirm that the information in the attached report (including any changes, additions, or comments I have made) is accurate to the best of my knowledge and belief.

[Redacted Signature]

4-1-92
Date

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I request that you do not release my name.

You may release my name to the manufacturer but I request that you not release it to the general public.

You may release my name to the manufacturer and to the public.

26 MAR 1992
A. A. K. O. A.