



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

DOT Auto Safety Hotline
Vehicle Owner's Questionnaire
To Report Vehicle Safety Defects
1-888-CASH-2-DOT
(1-888-327-4236)
INTERNET www.nhtsa.dot.gov/hotline

FOR AGENCY USE ONLY 1374

Date Received

Repository ☐

2003 MAY 03 APR 2003: 07

Reference No.
10015134

OWNER INFORMATION (Type or Print)

Name

Daytime Telephone Number

E-mail Address

Address

Evening Telephone Number

City DAMARISCOTTA

State ME

Zip Code

Do you authorize NHTSA to provide a copy of this report to the manufacturer of your vehicle? ☐ YES ☒ NO
In the absence of an authorization, NHTSA WILL NOT provide your name or address to the vehicle manufacturer.
Signature of Owner Date 4/20/03

VEHICLE INFORMATION

17 digit vehicle identification number located at bottom of windshield or driver's door

Make

GULF TOYOTA

Model

TACOMA

Model Year

2002

5TEUN72N722012422

Date Purchased

11/30/01 Leased

Dealer's Name and Telephone Number

Maine Mall Motors 207-774-1429

Engine:

No: Cylinders 6

Fuel Type:

Gasoline

Original Owner

Dealer's City

50. Portland

State

ME

Zip Code

04106

Transmission Type

AUTOMATIC

☒ Antilock Brakes

Powertrain

☒ Cruise Control

Vehicle Component Code

103000 POWER TRAIN: AUTOMATIC TRANSMISSION

Multiple Failure: 1

FAILED COMPONENT(S)/PART(S) INFORMATION

Incident Date(s)

12/02

Failure Mileage

12,102

Failure Speed

45 MPH

ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A TIRE FAILURE

Tire Make

Tire Model (Name or Number)

Tire Size (Example P215/65R15)

DOT No. (Example: DOTM15ABC036)

☐ Original Equipment

☐ Prior Repair

Failure Location:

Tire Component Code

Tire Failure Type

ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A CHILD SEAT FAILURE

Make:

Date Manufactured:

Model No./Name:

Seat Type:

Installation System:

Child Seat Component Code:

Failed Part:

APPLICABLE INCIDENT INFORMATION

(Please describe in detail the incident(s), failure(s), crash(es), and injury(ies).)

Crash

☐ Yes ☒ No

Fire

☐ Yes ☒ No

Number of Persons Injured

0

Number of Deaths

0

Reported to Police

N Lincoln County

Narrative Description of Incident(s), Crash(es), and Injury(ies).

Please describe (1) events leading up to the failure, (2) failure and its consequences, and (3) what was done to correct the failure; i.e., parts repaired or replaced (and if old part is available).

THE VEHICLE DOWN SHIFTED 2 GEARS, WHICH CAUSED THE VEHICLE TO SPIN OUT OF CONTROL. *JB CROSS Highway 9
Rolled over onto right side, causing \$11,000 in damage. Other
Vehicles, cars and trucks were going up that same hill with no
problems whatsoever. If traffic had been coming south at the
time # of persons injured could have been quite different. Apparently
this truck has a high speed Low torque engine, fine for a race car
but what good is it in a pickup truck? OVER

Include, if available: Police/Fire Department Report, Photos, and Repair Invoice.

ATTACH ADDITIONAL SHEETS IF NECESSARY

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.

Narrative Description of Incident(s), Failure(s), Crash(es), and Injury(ies)

I have communicated with Toyota by phone and E-mail and have not had the courtesy of a reply to either. Apparently they are unconcerned about this problem. By the way there were 3 other Toyota Pick ups in the body shop at the same time as mine with the same damage. Also the rescue people who showed up at the accident seemed remark that they respond to 2 or 3 Toyota Tacoma hubcap drive off accidents every week all winter long. (Sound like a problem to you?)

ATTACH ADDITIONAL SHEETS IF NECESSARY

U.S. Department
of Transportation

National Highway
Traffic Safety
Administration

400 7th Street, SW
Washington, DC 20590

1300

BUSINESS REPLY MAIL

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

NO POSTAGE
NECESSARY
IF MAILED
IN THE
UNITED STATES



**VEHICLE
OWNER'S
QUESTIONNAIRE**

DOT AUTO SAFETY HOTLINE

TO REPORT VEHICLE SAFETY DEFECTS
COMPLETE THIS FORM
ON

DASH2DOT

and dial toll free at

1-888-DASH-2-DOT
1-888-327-4236

DOT Auto Safety Hotline
(DASH) 2 DOT



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National Highway Traffic Safety
Administration
Washington, DC 20590

**THE ATTACHMENTS TO THIS
DOCUMENT HAVE BEEN REMOVED
TO PROTECT UNWARRANTED
INVASION OF PERSONAL PRIVACY
PURSUANT TO EXEMPTION 6 OF
THE FREEDOM OF INFORMATION
ACT (FOIA), 5 U.S.C. 552(b)(6).**