

U.S. Department
of TransportationNational Highway
Traffic Safety
Administration

DOT Auto Safety Hotline

Vehicle Owner's Questionnaire

TO REPORT VEHICLE SAFETY DEFECTS

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

INTERNET: www.nhtsa.dot.gov/hotline

FOR AGENCY USE ONLY

Date Received

 Od_or _____
 rt_dt _____
 od_rt _____
 up_fr _____

2003 JUN 26 PM 1:38

Reference No.

10025075

OWNER INFORMATION (Type or Print)

Name

Street Apt. No.

City State

MIDNASSQUAN NY

Daytime Telephone Number

 Do you authorize NHTSA to provide a copy of this report to the manufacturer of your vehicle? ☒ YES ☐ NO
 In the absence of authorization, NHTSA WILL NOT provide your name or address to the vehicle manufacturer.

Signature of Owner

Date 6/16/03

PRODUCT INFORMATION

Vehicle Identification No. (VIN.) (Located at bottom of windshield on driver's side)

Make

Model

Year

4T1BF29B22U

TOYOTA

AVALON

2002

Purchased Date

2/15/02

Dealer's Name

GATEWAY TOYOTA

Dealer's City

TOMES RIVER, NJ

State

NJ

Zip Code

08753

Engine Size (CID/CC/L)

☐ Turbo
☐ Diesel
☐ Gas
☐ Fuel Injection

No. Cylinders

6

Manufacture Date (on driver's door or pillar)

ORIGINAL DOOR WAS REPLACED

Transmission Type

☐ Manual
☒ Automatic

Restraint System

☒ Driver's Air Bag ☐ Motorized
☒ Passenger's Air Bag ☐ 2-Point Belt
☒ 3-Point Belt

Cruise Control

☒ Yes
☐ No

Drivetrain

☒ Front
☐ Rear
☐ 4-Wheel

Vehicle Type

☒ Car ☐ Sport Utility
☐ Van ☐ Truck
☐ Minivan ☐ Motorcycle
☐ Other

Body Style

☐ 2-Door ☒ 4-Door
☐ Stationwagon
☐ Pick Up Truck
☐ Other

FAILED COMPONENT(S)/PART(S) INFORMATION

Part Name(s)

MOUNTED SIDE AIRBAGS (SRS)

Location

☒ Left ☐ Right
☐ Front ☐ Rear

Failed Part(s)

☒ Original
☐ Replacement

Handicap Adaptive Equip

☐ Yes
☒ No

TO BE COMPLETED WHEN REPORTING A TIRE FAILURE

Tire Brand

Tire Name

Complete Tire Size

DOT No.

No. of Failures

Date(s) of Failure(s)

Mileage at Failure(s)

Vehicle Speed at Failure(s)

Failed Part(s) Available?

☐ Yes ☐ No

NHTSA Previously Contacted?

☐ Yes ☐ No

APPLICABLE INCIDENT INFORMATION

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

Crash

☒ Yes ☐ No

Fire

☐ Yes ☒ No

Number of Persons Injured

DRIVER

Number of Fatalities

NONE

Reported to Manufacturer

☒ Yes ☐ No

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

As I approached the crossing Rt. 70 with the traffic light eastbound I report GREEN my car was hit on the driver side of my Toyota.

I and my wife were wearing safety belts, yet the force of the hitting my car pushed me into my vehicle. Later called Rt. 70 and police called my wife and I. There was the presence of the police.

The driver of the car who hit the driver side 'may a Red Light' and was cited by P.D.

There was NO deployment of Side Air Bag - driver side (SRS)

Toyota Motor Corp. has notified & changed back to 2003 4T1BF29B22U.

Continued on back.

The Privacy Act of 1974 - Public Law 93-579 This information is requested pursuant to 44 U.S.C. Chapter 301. You are under no obligation to respond to this questionnaire. Your response may be used to assist NHTSA in determining whether a manufacturer should take appropriate action to correct a safety defect. If 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 suffered Contusion of Chest wall.
If Airbag if side air bag deployed, I would not have suffered contusion
and bruise of lower left side of back & ribs.

Photo enclosed.

ATTACH ADDITIONAL SHEETS IF NECESSARY

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

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, NSA-10.01
400 7th Street, SW
Washington, DC 20590

NO POSTAGE
NECESSARY
IF MAILED
IN THE
UNITED STATES

Complete and return or place in your car manual for future use



**VEHICLE
OWNER'S**

QUESTIONNAIRE

(VOC)

DOT AUTO SAFETY HOTLINE

TO REPORT VEHICLE SAFETY DEFECTS
COMPLETE THIS FORM

OR

DASH 2 DOT

and dial toll free at

1-888-DASH-2-DOT

1-888-327-4236

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(DASH) 2 DOT



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