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-DASH-2-DOT
(1-888-327-4236)
INTERNET:www.nhtsa.dot.gov/hotline

2004 APR 20 AM 10:22

FOR AGENCY USE ONLY 1367

Date Received	Repository
12-MAR-2004	
	Reference No. 10063095

OWNER INFORMATION (Type or Print)

Name	[redacted]	Number	E-mail Address
Address	[redacted]	Evening Telephone Number	
City DOWNERS GROVE	State IL	Zip Cod [redacted]	

Do you authorize NHTSA to provide [redacted] of this report to the manufacturer of your vehicle? ☒ YES ☐ NO
In the absence of an au[redacted]de your name or address to the vehicle manufacturer.
Signature of Owner [redacted] Date 3.23.04

VEHICLE INFORMATION

17 Digit Vehicle Identification Number Located at bottom of windshield on driver's side	Make	Model	Model Year
4T1BE32K13U199697	TOYOTA	CAMRY	2003

Date Purchased	Dealer's Name and Telephone Number			Engine: No. Cylinders	Fuel Type:
Original Owner ☐	Dealer's City	State	Zip Code		

Transmission Type	☐ Antilock Brakes ☐ Cruise Control	Powertrain	Vehicle Component Code: 180000 VEHICLE SPEED CONTROL
			Multiple Failure: 2

FAILED COMPONENT(S)/PART(S) INFORMATION

Incident Date(s)	Failure Mileage	Failure Speed	
14-FEB-2004			

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: DOTMALBABC036)	☐ 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 complete to detail the incident(s), Failure(s), Crash(es), and Injury(ies).)

Crash	Fire	Number of Persons Injured	Number of Deaths	Reported to Police
☒ Yes ☐ No	☐ Yes ☒ No			Y

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).

VEHICLE EXPERIENCED SUDDEN ACCELERATION UPON MAKING A RIGHT TURN INTO A PARKING SPACE. VEHICLE HIT A CEMENT WALL. THIS FAILURE ALSO OCCURRED WHILE TURNING RIGHT ONTO A MAIN STREET. *AK

concrete

FAILURE ALSO OCCURRED ON YET ANOTHER OCCASION. NO COLLISION. WENT TO STEP ON GAS TO MOVE UP BEHIND ANOTHER VEHICLE AT RED LIGHT AND CAR ACCELERATED. I IMMEDIATELY BRAKED AND ABLE TO STOP CAR.

Include, if available: Police/Fire Department Report, Photos, and Repair Invoice. ATTACH ADDITIONAL SHEETS IF NECESSARY