



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

FOR AGENCY USE ONLY 100147

Date Received: 2004 JUN 24 7:24 AM  
71-MAY-2004  
Repository:   
Reference No: 33  
20073475

**OWNER INFORMATION (Type or Print)**

Name: [REDACTED]  
Address: [REDACTED]  
City: WESTBURY State: NY Zip Code: [REDACTED]  
Daytime Telephone Number: [REDACTED] E-mail Address: [REDACTED]  
Evening Telephone Number: S/A/A

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: [REDACTED] Date: 6/13/04

**VEHICLE INFORMATION**

17 digit Vehicle Identification Number Located at bottom of windshield on driver's side: 4T1BG22K4W [REDACTED]  
Make: TOYOTA Model: CAMRY Model Year: 1998  
Date Purchased: 9/26/97 Dealer's Name and Telephone Number: WESTBURY TOYOTA  
Original Owner:  Dealer's City: WESTBURY State: NY Zip Code: 11590  
Engine No: Cylinders: 4 Fuel Type: GASOLINE  
Transmission Type: AUTOMATIC  Antilock Brakes  Cruise Control  
Powertrain: [REDACTED] Vehicle Component Code: 161300 SEAT BELTS: FRONT: RETRACTOR  
Multiple Failure: 7

**FAILED COMPONENT(S)/PART(S) INFORMATION**

Incident Date(s): 11-FEB-2004 Failure Mileage: 87,844 Failure Speed: NA

**ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A TIRE FAILURE**

Tire Make: [REDACTED] Tire Model (Name or Number): [REDACTED] Tire Size (Example P215/65R15): [REDACTED]  
DOT No. (Example: DOTM19ABC036): [REDACTED]  Original Equipment  Prior Repair Failure Location: [REDACTED]  
Tire Component Code: [REDACTED] Tire Failure Type: [REDACTED]

**ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A CHILD SEAT FAILURE**

Make: [REDACTED] Date Manufactured: [REDACTED] Model No./Name: [REDACTED]  
Seat Type: [REDACTED] Installation System: [REDACTED]  
Child Seat Component Code: [REDACTED] Failed Part: [REDACTED]

**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: [REDACTED] Number of Deaths: [REDACTED] Reported to Police: N

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).

WHEN THE CONSUMER UNLEASHED THE DRIVER AND PASSENGER SEAT BELTS THEY DID NOT RETRACT. CONSUMER CONTACTED DEALER ABOUT THIS ISSUE. \*AK

Includes, 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)

BELTS ON BOTH FRONT POSITIONS MUST BE TUGGED IN ORDER FOR THEM TO RETRACT. THIS IS ONLY AN INCONVENIENCE, BUT I AM CONCERNED THAT THIS MIGHT PORTEND A DEFECT WHICH WOULD CAUSE THE BELTS TO FAIL IN THE EVENT OF A COLLISION. I HAD AN EXTENDED WARRANTY ON THE VEHICLE, AND THE PROBLEM WAS REPORTED TO THE DEALER BEFORE ITS EXPIRATION DATE/MILEAGE. THE EXTENDED WARRANTY DOES NOT EXCLUDE SPECIFICALLY IN WRITING COVERAGE OF THIS PROBLEM. (THE FRONT PASSENGER BELT WILL GET CAUGHT IN THE DOOR OCCASIONALLY WHEN THE DOOR IS CLOSED UNLESS THE BELT IS TUGGED ON).

ATT: IN VOICE FOR REPORTING OF SEAT BELT PROBLEM

ATTACH ADDITIONAL SHEETS IF NECESSARY

US Department of Transportation

National Highway Traffic Safety Administration

400 Seventh St., S.W. Washington, D.C. 20590

Official Business Penalty for Private Use \$300



GRE FROM Far Far Away



BUSINESS REPLY MAIL

FIRST CLASS PERMIT NO 78173 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, NVS-216 400 7th Street, SW Washington, DC 20590



DOT Auto Safety Hotline (DASH) & DOT

1-888-DASH-2-DOT 1-888-327-4238

and dial toll free at

DASH2DOT

TO REPORT VEHICLE SAFETY DEFECTS COMPLETE THIS FORM OR

DOT AUTO SAFETY HOTLINE

QUESTIONNAIRE

VEHICLE OWNER'S



US Department of Transportation National Highway Traffic Safety Administration http://www.safercar.gov

**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).**