



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
(1-888-327-4238)
INTERNET: www.nhtsa.dot.gov/hotline

FOR AGENCY USE ONLY 100182

Date Received

2004 07 15 14:57

Repository

Reference No.
10092436

OWNER INFORMATION (Type or Print)

Name: [REDACTED]
Address: [REDACTED]
City: LITTLE NECK State: NY Zip Code: [REDACTED]

Daytime Telephone Number

E-mail Address

Evening 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 an authorization, NHTSA WILL NOT provide your name or address to the vehicle manufacturer.
Signature of Owner _____ Date: / /

VEHICLE INFORMATION

17 digit Vehicle Identification Number Located at bottom of windshield on driver's side: 4T1BF1889WU [REDACTED]
Make: TOYOTA Model: AVALON Model Year: 1998
Date Purchased: _____ Dealer's Name and Telephone Number: _____ Engine: _____ Fuel Type: Gas
Original Owner: Dealer's City: _____ State: _____ Zip Code: _____
Transmission Type: AUTOMATIC Antilock Brakes Cruise Control Powertrain: FRONT WHEEL DRIVE
Vehicle Component Code: 341000 COMMUNICATIONS:HORN ASSEMBLY
Multiple Failure: 2

FAILED COMPONENT(S)/PART(S) INFORMATION

Incident Date(s): 15-JUL-2004 Failure Mileage: 30000 Failure Speed: _____

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: DOTM123ABC038) 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: _____ Number of Deaths: _____ 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).

THE HORN WAS DEFECTIVE. IT WORKED INTERMITTANTLY. OWNER HAS TAKEN THE VEHICLE TO THE DEALER. THEY REPAIRED IT ONCE IN JUNE 2003, NOW THE HORN IS DEFECTIVE AGAIN. *JB

Please Turn

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)

The horn works in stationary position not going under 20 miles an hour. It doesn't respond at normal road speed. It was not corrected on June 28, 2003 when I brought it for repair at Toyota Star. I brought it back the following day. See enclosed statement.

Approximately a year later the horn became defective again. I called Star Toyota & Mr. Sparrella (the manager) said the fault could be the air bag since the wires from the bag & horn are connected. Is this so? As you can see, I have very little mileage on this car.

Please advise.
Thank you



ATTACH ADDITIONAL SHEETS IF NECESSARY

U.S. Department of Transportation

National Highway Traffic Safety Administration

400 Seventh St., S.W. Washington, D.C. 20690

Official Business Penalty for Private Use \$300



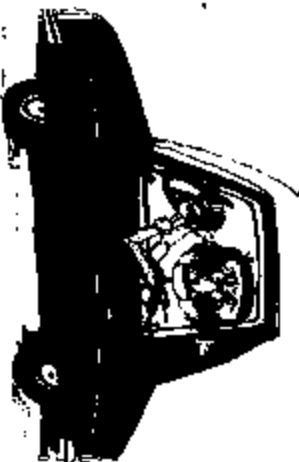
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POSTAGE WILL BE PAID BY NATL. HWY. TRAFFIC SAFETY ADMIN.

U.S. Department of Transportation
National Highway Traffic Safety Administration
Office of Defects Investigation, NV8-218
400 7th Street, SW
Washington, DC 20590



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and dial toll free at

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TO REPORT VEHICLE SAFETY DEFECTS
COMPLETE THIS FORM
ON

DOT AUTO SAFETY HOTLINE

QUESTIONNAIRE



**VEHICLE
OWNER'S**

**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).**