



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  
(1-888-327-4242)  
INTERNET: www.nhtsa.dot.gov/hotline

FOR AGENCY USE ONLY 100145

Date Received  
2005 FEB 16 PM 9:50  
19-JAN-2005

Repository   
Reference No.  
10108516

**OWNER INFORMATION (Type or Print)**

Name [REDACTED]  
Address [REDACTED]  
City LARGO State FL Zip Code [REDACTED]

Daytime Telephone Number [REDACTED]  
E-mail Address [REDACTED]  
Residence Telephone Number [REDACTED]

Do you authorize NHTSA to provide a copy of this report to the manufacturer of your vehicle?  YES  
In the absence of your signature, this report will be sent to the vehicle manufacturer. *Call*  
Signature of Owner [REDACTED] Date 2/10/05

**VEHICLE INFORMATION**

17 digit Vehicle Identification Number located at bottom of windshield  
NOT AVAILABLE 3THCA30854S [REDACTED] EXUS  
Model ES 330 Model Year 2004  
LEASER HDR. SW.

Date 3/29/04 Dealer's Name and Telephone Number LETUS OF CLEARWATER 727 226 6000  
Original Owner  Dealer's City CLEARWATER State FL Zip Code 33761  
Engine: No. Cylinders Fuel Type: Gas

Transmission Type AUTOMATIC  Antilock Brakes  Powertrain  
 Cruise Control  
Vehicle Component Code 180000 VEHICLE SPEED CONTROL  
Multiple Failure: 3

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

Incident Date(s) 17-JAN-2005 Failure Mileage 10000 Failure Speed

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

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

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

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

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).

1. WHEN ATTEMPTING TO ACCELERATE THE VEHICLE HESITATED, THEN SURGED FORWARD WITHOUT WARNING. NO IMPACT REPORTED. PLEASE PROVIDE ADDITIONAL INFORMATION. \*JB
2. acceleration doesn't always occur when pressing on the accelerator. (even after stopping at stop signs)
3. when the car lunges forward into the traffic lane, it can be unsettling to the driver.
4. impact has not occurred but has been close.

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)

SO FAR: NO CRASHES OR INJURIES

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



NO POSTAGE  
NECESSARY  
IF MAILED  
IN THE  
UNITED STATES

**BUSINESS REPLY MAIL**

FIRST CLASS PERMIT NO 78178 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



**VEHICLE  
OWNER'S**

**QUESTIONNAIRE**

**DOT AUTO SAFETY HOTLINE**

**TO REPORT VEHICLE SAFETY DEFECTS**

**COMPLETE THIS FORM**

**OR**

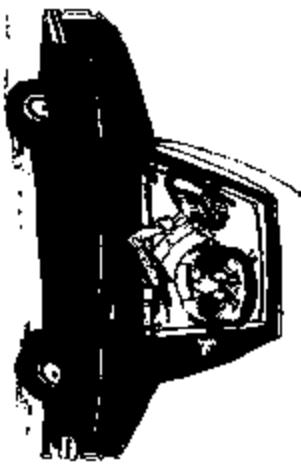
**DASH2DOT**

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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