



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

2005

FOR AGENCY USE ONLY 100222

Date Received

APR 28 AM 8:33
01-APR-2005

Repository ☐

Reference No.
10117286

OWNER INFORMATION (Type or Print)

Name
Address
City **BOSTON** State **MA** Zip Code

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 a signature, provide your name or address to the vehicle manufacturer.
Signature of Owner Date **4/11/05**

VEHICLE INFORMATION

17 digit Vehicle Identification Number Located at bottom of windshield on driver's side **JTJHA31U84** Make **LEXUS** Model **RX330** Model Year **2004**

Date Purchased **9/03** Dealer's Name and Telephone Number **LEXUS OF WATERTOWN** Engine: No. Cylinders Fuel Type: **Gas**

Original Owner ☒ Dealer's City **Watertown** State **MA** Zip Code

Transmission Type **AUTOMATIC** ☒ Antilock Brakes ☒ Cruise Control Powertrain **ALL WHEEL DRIVE** Vehicle Component Code **181000 VEHICLE SPEED CONTROL:ACCELERATOR PEDAL**
Multiple Failure: **1**

FAILED COMPONENT(S)/PART(S) INFORMATION

Incident Date(s) **07-FEB-2005** Failure Mileage **6800** Failure Speed **20 & EXCELERATING ONTO TO HIGHWAY. Gas pedal got stuck plus no brake.**

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: 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: 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

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 ACCELERATOR STUCK, AND CONSUMER WAS NOT ABLE TO STOP THE VEHICLE. CONSUMER LEFT THE VEHICLE, AND CONTACTED THE MANUFACTURER. THEY HAD THE VEHICLE TOWED, SUPPOSEDLY REPAIRED, BUT CONSUMER WAS NOT SATISFIED. *AK
Because I did not have a Grade I had to use the Emergency Brake which slowed the car down enough to put it in Park (while moving) then shut off the ignition. My worried now are the safety of other RX330s since this car came from Japan with no clips on the Kickpanel & My Transmission!

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

The Privacy Act of 1974 (Public Law 93-578) 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.



March 28, 2005

[REDACTED]
Boston, MA [REDACTED]

Dear [REDACTED]

Thank you for contacting the Lexus Customer Satisfaction Department regarding the transmission concern in your 2004 RX 330 Vehicle Identification Number JTJHA31U640[REDACTED]. As you requested, we are responding in writing. The Lexus Group Vice President and General Manager is Denny Clements. He can be reached at the above address.

Please contact the Lexus Customer Satisfaction Department at 1-800-255-3987, Monday through Friday, 8:00 a.m. to 5:00 p.m., Pacific Time, if you require further assistance.

Sincerely,

A handwritten signature in black ink, appearing to read "Nelson Ceja".

Nelson Ceja
Customer Satisfaction Representative

nc/200503140250fl



March 2, 2005

[REDACTED]
Boston, MA [REDACTED]

Dear [REDACTED]

Thank you for contacting the Lexus Customer Satisfaction Department regarding the transmission and lower center console clips. We appreciate the time you have taken to share your thoughts. As you requested, we are responding in writing.

Lexus of Watertown has indicated that your 2004 RX 330, Vehicle Identification Number JTJHA31U640 [REDACTED] was inspected for the lower center console clips and repaired within Lexus specifications. We apologize that the vehicle has not met your expectation. Please be assured that your dissatisfaction has been documented in our records for product improvement consideration.

Please contact the Lexus Customer Satisfaction Department at 1-800-255-3987, Monday through Friday, 6:00 a.m. to 5:00 p.m., Pacific Time, if you require further assistance.

Sincerely,

A handwritten signature in cursive script, appearing to read 'Melissa Helfrich'.

Melissa Helfrich
Customer Satisfaction Representative

mh/200502221291fl

cc: Mr. Ken Widger, Customer Service Manager - Lexus of Watertown

**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).**