

 U.S. Department of Transportation National Highway Traffic Safety Administration	<b>DOT Auto Safety Hotline</b> <b>Vehicle Owner's Questionnaire</b> To Report Vehicle Safety Defects 1-888-DASH-2-DOT (1-888-327-4236) INTERNET: www.nhtsa.dot.gov/hotline		<b>FOR AGENCY USE ONLY 100148</b>	
	Name _____ Address _____ City <u>HENDERSON</u> State <u>NV</u> Zip Code _____		Date Received 04-MAY-2005 <sup>7:05 JUN</sup> -3 AM 3:14	Repository <input type="checkbox"/> Reference No. 10119781
Do you authorize NHTSA to provide a copy of this report to the manufacturer of your vehicle? <input checked="" type="checkbox"/> YES <input checked="" type="checkbox"/> NO In the absence of an authorization, NHTSA WILL NOT provide your name or address to the vehicle manufacturer.			Signature of Owner _____ Date <u>05/24/05</u>	
<b>VEHICLE INFORMATION</b>				
17 digit Vehicle Identification Number Located at bottom of windshield on driver's side <u>2T1BR12E4WC</u>		Make <u>TOYOTA</u>	Model <u>COROLLA</u>	Model Year <u>1998</u>
Date Purchased _____	Dealer's Name and Telephone Number <u>FINDLEY TOYOTA</u>		Engine: No. Cylinders <u>4</u>	Fuel Type: <u>Gas</u>
Original Owner <input checked="" type="checkbox"/>	Dealer's City <u>HENDERSON</u>	State <u>NV</u>	Zip Code <u>89014</u>	
Transmission Type <u>AUTOMATIC</u>	<input type="checkbox"/> Antilock Brakes <input checked="" type="checkbox"/> Cruise Control <u>No cruise</u>	Powertrain <u>UNKNOWN</u>	Vehicle Component Code <u>113000 ELECTRICAL SYSTEM:STARTER ASSEMBLY</u> Multiple Failure: <u>3</u>	
<b>FAILED COMPONENT(S)/PART(S) INFORMATION</b>				
Incident Date(s) <u>18-APR-2005</u>	Failure Mileage <u>44000</u>	Failure Speed <u>2</u>		
<b>ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A TIRE FAILURE</b>				
Tire Make _____	Tire Model (Name or Number) _____		Tire Size (Example P216/85R15) _____	
DOT No. (Example: D07MAL9ABC03B) _____	<input type="checkbox"/> Original Equipment <input type="checkbox"/> Prior Repair	Failure Location: _____		
Tire Component Code _____			Tire Failure Type _____	
<b>ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A CHILD SEAT FAILURE</b>				
Make: _____	Date Manufactured: _____	Model No./Name: _____		
Seat Type: _____		Installation System: _____		
Child Seat Component Code: _____		Failed Part: _____		
<b>APPLICABLE INCIDENT INFORMATION</b>				
(Please describe in detail the incident, event(s), crash(es), and injury(ies).)				
Crash <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Fire <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Number of Persons Injured <u>_____</u>	Number of Deaths <u>_____</u>	Reported to Police <u>N</u>
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).				
CONTACT STATES: STARTER STUCK, COULDN'T SHUT OFF IGNITION. THEN SMOKE BEGAN TO COME OUT OF THE VEHICLE. TOOK VEHICLE TO DEALER, AND REPAIRS WERE DONE @ A COST OF \$1,300. CAR WAS REGULARLY MAINTAINED. IN THE PAST, WHILE TURNING KEY, ENGINE WOULDN'T START. THIS HAPPENED TWICE. SERVICE RECORDS STATED STARTER SHORTED OUT AND STARTER WIRES BURNED. REPLACED STARTER. *AK				
Include, if available: Police/Fire Department Report, Photos, and Repair Invoice. <span style="float: right;">ATTACH ADDITIONAL SHEETS IF NECESSARY</span>				
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)

Description of incident listed is correct.

Since before incident (different days) engine did not turn over - as I made several trips during day - I thought, maybe, I just didn't turn key far enough. I even had a mechanic friend start the car one week before incident and started fine. I feel this was not neglect on my part. I, also, took car to Dealer for all changes just prior to incident thinking something may be found... A Smoking car in garage. Very scary.

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 73173 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**

DOT Auto Safety Hotline  
(DASH) 2 DOT



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[www.nhtsa.dot.gov/hotline](http://www.nhtsa.dot.gov/hotline)

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).