



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 100148	
Date Received NOV -2 PM 2:44	Repository <input type="checkbox"/>
28-SEP-2005	Reference No. 10138023

**OWNER INFORMATION (Type or Print)**

Name: [REDACTED]

Address: [REDACTED]

City: LAS VEGAS State: NV Zip Code: [REDACTED]

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

Evening Telephone Number: [REDACTED]

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 5TENM32NA12 [REDACTED]	Make TOYOTA	Model TACOMA	Model Year 2001
Date Purchased 20-JUN-01	Dealer's Name and Telephone Number Desert Toyota (702) 871-4111		Engine: No: Cylinders 4
Original Owner <input checked="" type="checkbox"/>	Dealer's City Las Vegas	State NV	Zip Code 89146
Transmission Type AUTOMATIC	<input checked="" type="checkbox"/> Antilock Brakes <input checked="" type="checkbox"/> Cruise Control	Powertrain REAR WHEEL DRIVE	Vehicle Component Code 021540 SUSPENSION:FRONT:CONTROL ARM:LOWER BALL JOINT
			Multiple Failure: 1

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

Incident Date(s) 28-SEP-2005	Failure Mileage 39533	Failure Speed 35
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**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)	<input type="checkbox"/> Original Equipment <input type="checkbox"/> 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 injuries.)*

Crash <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Fire <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Number of Persons Injured	Number of Deaths	Reported to Police N
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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).

DT: THE CONSUMER STATED THAT 2001 TOYOTA TACOMA WAS TRAVELING AT 35 MPH WHEN THE TIRE STARTED MAKING NOISE. VEHICLE PULLED TO THE RIGHT WHEN THE CONSUMER PULLED OVER TO CHECK THE PROBLEM. DISCOVERED THAT THE LOWER BALL JOINT BROKE. THE CONSUMER CALLED TOYOTA, AND WAS TOLD THAT THIS VEHICLE WAS NOT COVERED UNDER THE RECALL DUE TO VIN ALTHOUGH IT HAD THE SAME PROBLEM AS MENTIONED IN THE RECALL. O THE LOCATION OF THE BALL JOINT WAS THE RIGHT PASSENGER SIDE FRONT BALL JOINT. THE CONSUMER WAS HAVING THAT FIXED TODAY. TOYOTA OFFERED NO FREE REMEDY TO THE CONSUMER.\*AK

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 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.