



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

FOR AGENCY USE ONLY 100148

Date Received
2005 DEC 12 AM 8:00
22-NOV-2005

Repository
Reference No.
10143458

OWNER INFORMATION (Type or Print)

Name [REDACTED]
Address [REDACTED]
City WESTFORD State MA 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 [REDACTED] Date 11/26/05

VEHICLE INFORMATION

17 digit Vehicle Identification Number located at bottom of windshield on driver's side: JTKE17 [REDACTED]
Make TOYOTA Model SCION TC Model Year 2008
Date Purchased 20-JUL-05 Dealer's Name and Telephone Number ~~ACTON TOYOTA~~ 978-283-1500 ACTON TOYOTA Engine: No. Cylinders 4 Fuel Type: Gas
Original Owner Dealer's City ACTON State MA Zip Code 01720
Transmission Type Automatic Antilock Brakes Cruise Control Powertrain FRONT WHEEL DRIVE Vehicle Component Code 1B1000 VEHICLE SPEED CONTROL:ACCELERATOR PEDAL Multiple Failure: 1

FAILED COMPONENT(S)/PART(S) INFORMATION

Incident Date(s) 02-SEP-2005 Failure Mileage 2900 Failure Speed ALL SPEEDS

ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A TIRE FAILURE

Tire Make [REDACTED] Tire Model (Name or Number) [REDACTED] Tire Size (Example P215/65R15) [REDACTED]
DOT No. (Example: DOTM1ABBC036) Original Equipment Prior Repair Failure Location: [REDACTED]
Tire Component Code [REDACTED] Tire Failure Type [REDACTED]

ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A CHILD SEAT FAILURE

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

APPLICABLE INCIDENT INFORMATION

(Please describe in detail the incident(s), Fatality, Crash(es), and Injury(es).)

Crash Yes No Fire Yes No Number of Persons Injured NONE Number of Deaths NONE 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).

DT: THE CONTACT STATED THE BRAKE PEDAL AND THE ACCELERATOR PEDAL ARE TOO CLOSE TOGETHER IF THE CONTACT IS NOT CAREFUL IN THE PLACEMENT OF HIS FEET HE WILL BRAKE AND ACCELERATE AT THE SAME TIME. THE DEALER SAID IT WAS THE DESIGN OF THE VEHICLE, AND THERE WERE NO OTHER COMPLAINTS ABOUT THIS PROBLEM. *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 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)

8-10 INCIDENTS - TWO NEAR CRASHES

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



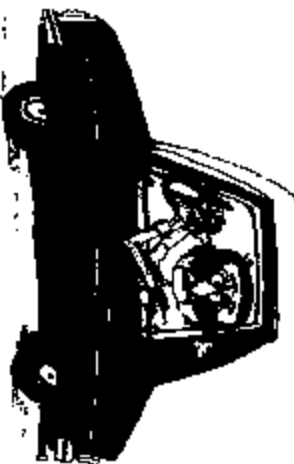
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BUSINESS REPLY MAIL

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



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DASH2DOT

and dial toll free at

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