



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

28-NOV-2005

Repository

Reference No.
10143808

OWNER INFORMATION (Type or Print)

Name: [REDACTED]
Address: [REDACTED]
City: ANCHORAGE State: AK Zip Code: [REDACTED]

Daytime Telephone Number
907-341-7722

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 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: JT3RN37W6PC [REDACTED]
Make: TOYOTA Model: 4 RUNNER Model Year: 1993

Date Purchased
01-SEP-94

Dealer's Name and Telephone Number
NYE TOYOTA

Engine:
No: Cylinders 4

Fuel Type:
Gas

Original Owner

Dealer's City
ANCHORAGE

State: AK Zip Code:

Transmission Type: Antilock Brakes
MANUAL Cruise Control

Powertrain
4 WHEEL DRIVE

Vehicle Component Code
017400 STEERING:LINKAGES:ROD:RELAY:CONNECTING

Multiple Failure: 1

FAILED COMPONENT(S)/PART(S) INFORMATION

Incident Date(s): 26-NOV-2005
Failure Mileage:
Failure Speed:

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: DOTM9ABC036): 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: 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 STATES THERE IS NHTSA RECALL CAMPAIGN 05V389000 CONCERNING THE STEERING:LINKAGES:ROD:RELAY:CONNECTING. THE PARTS NEEDED TO REPAIR THE VEHICLE WAS NOT AVAILABLE AT THE LOCAL DEALERSHIP. SHE SPOKE TO THE MANUFACTURER, WHO CONFIRMED THAT PARTS WERE NOT AVAILABLE. *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)

12/6/05

I'm not quite sure what to do with this. The evening I filed this report there was a message from the local Toyota dealer & they asked if I call them back to schedule an appointment, I did and the car was repaired on 12/3/05. Thank you for your help.

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

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

NO POSTAGE NECESSARY IF MAILED IN THE UNITED STATES



VEHICLE OWNER'S QUESTIONNAIRE

DOT AUTO SAFETY HOTLINE

TO REPORT VEHICLE SAFETY DEFECTS, COMPLETE THIS FORM OR

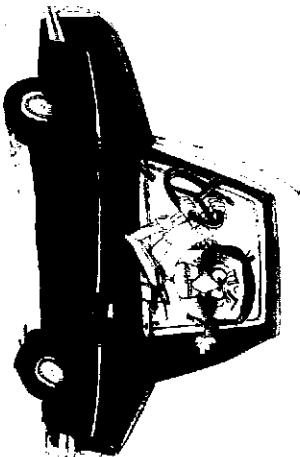
DASH2DOT

and dial toll free at

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