



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

2008 FEB 24 AM 9:07
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10148010

OWNER INFORMATION (Type or Print)

Name	[REDACTED]			Daytime Telephone Number	[REDACTED]	E-mail Address	[REDACTED]
Address	[REDACTED]			Evening Telephone Number	[REDACTED]		
City	HAYESVILLE	State	NC	Zip Code	[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 1/1

VEHICLE INFORMATION

17 digit Vehicle Identification Number (located on bottom of windshield on driver's side)	Make	Model	Model Year
JT4RN01 [REDACTED]	TOYOTA	TOYOTA TRUCK	1991
Date Purchased	Dealer's Name and Telephone Number	Engine:	Fuel Type:
1991	Maxon Toyota (to make repairs)	No: Cylinders 4	Gas
Original Owner <input checked="" type="checkbox"/>	Dealer's City	State	Zip Code
	Hayesville, NC	NC	28745
Transmission Type	<input checked="" type="checkbox"/> Antilock Brakes	Powertrain	Vehicle Component Code
MANUAL	<input type="checkbox"/> Cruise Control	4 WHEEL DRIVE	017400 STEERING:LINKAGES:ROD:RELAY:CONNECTING
			Multiple Failure: 1

FAILED COMPONENT(S)/PART(S) INFORMATION

Incident Date(s)	Failure Mileage	Failure Speed
16-JAN-2008	87000	

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: DOTMALSABC036)	<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 injury(ies).)

Crash	Fire	Number of Persons Injured	Number of Deaths	Reported to Police
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			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 A NHTSA RECALL, #03V389000 ON THE VEHICLE REGARDING THE STEERING: ROD RELAY. THE VEHICLE IS NOT CURRENTLY HAVING THE PROBLEMS AS INDICATED IN THE RECALL. HOWEVER, THE PARTS NEEDED TO REPAIR THEIR VEHICLE ARE NOT AVAILABLE AT THEIR LOCAL DEALERSHIP. THE MANUFACTURER CONFIRMED THE PARTS ARE NOT AVAILABLE.

Dealer advised buyer that he had replacement parts. Owner traveled 60 miles each way (120) for appointment - no parts available when we arrived. Dealer should be reprimanded and possibly pay for time + travel expenses. It is inexcusable!

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.