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	Repository
2007 DEC 12 AM 9:32 08-NOV-2007	☐

Reference No. 10208423

OWNER INFORMATION (Type or Print)

Name		Daytime Telephone Number	E-mail Address
Address			
City WOODMERE	State NY	Zip Code	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 authoriza[illegible]ddress to the vehicle manufacturer.
Signature of Owner [redacted] Date 11/14/07

VEHICLE INFORMATION

17 digit Vehicle Identification Number Located at bottom of windshield on driver's side	Make	Model	Model Year
4T1BK46K47U[redacted]	TOYOTA	CAMRY	2007

Date Purchased	Dealer's Name and Telephone Number			Engine:	Fuel Type:
30-APR-07	Westbury Toyota			No: Cylinders 6	Gas
Original Owner ☒	Dealer's City Westbury	State N.Y	Zip Code		

Transmission Type			Vehicle Component Code
AUTOMATIC	☒ Antilock Brakes ☒ Cruise Control	Powertrain FRONT WHEEL DRIVE	103000 POWER TRAIN:AUTOMATIC TRANSMISSION Multiple Failure: 2

FAILED COMPONENT(S)/PART(S) INFORMATION

Incident Date(s)	Failure Mileage	Failure Speed	
30-APR-2007		1	

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: DOTMAL9ABC036)	☐ 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	Fire	Number of Persons Injured	Number of Deaths	Reported to Police
☐ Yes ☒ No	☐ Yes ☒ No	0	0	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).

TL*THE CONTACT OWNS A 2007 TOYOTA CAMRY. THE TRANSMISSION IN THE VEHICLE HAS BEEN DOWNSHIFTING INTERMITTENTLY WHILE DRIVING BETWEEN 1-30 MPH. THE VEHICLE OPERATED NORMALLY AT SPEEDS GREATER THAN 30 MPH. DURING DECELERATION, THE DOWNSHIFTING PULLS BACK AS IF THE VEHICLE HAD A MANUAL TRANSMISSION. THE VEHICLE WAS TAKEN TO TOYOTA ON TWO OCCASIONS. THE FIRST TIME, THE CONTACT WAS INFORMED THAT THE VEHICLE WAS DRIVING NORMALLY. THE SECOND TIME, THE DEALER STATED THAT THEY WERE WAITING FOR A BULLETIN. THE CONTACT STATED THAT THE DECEMBER ISSUE OF CONSUMER REPORTS HAS A REPORT THAT OUTLINED EXACTLY WHAT HE IS EXPERIENCING WITH HIS VEHICLE. THE CURRENT MILEAGE WAS 5,800 AND THE FAILURE MILEAGE WAS UNKNOWN.

Include, if available: Police/Fire Department Report, Photos, and Repair Invoice. ATTACH ADDITIONAL SHEETS IF NECESSARY

Narrative Description of Incident(s), Failure(s), Crash(es), and Injury(ies)

my complaint is with the down shift of the transmission, it was into the service dept 2x to no avail.

Attached please find consumer report confirming my complaint. I have been fearful this trans can lock and expect it corrected

ATTACH ADDITIONAL SHEETS IF NECESSARY

GARDEN CITY NY 115

14 NOV 2007 PM 3 L

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-210
400 7th Street, SW
Washington, DC 20590