



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

07-JAN-2008  
AM 7:36

Reference No.  
10214070

**OWNER INFORMATION (Type or Print)**

Name [REDACTED]  
Address [REDACTED]  
City HOLLYWOOD State FL 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  
JT6GF10U6X0 [REDACTED] Make LEXUS Model RX300 Model Year 1999  
Date Purchased 22-DEC-01 Dealer's Name and Telephone Number CAR MAX Engine: No: Cylinders 6 Fuel Type: Gas  
Original Owner [REDACTED] Dealer's City DANIE State FL Zip Code 33803  
Transmission Type AUTOMATIC  Antilock Brakes  Cruise Control Powertrain FRONT WHEEL DRIVE  
Vehicle Component Code 103000 POWER TRAIN:AUTOMATIC TRANSMISSION  
Multiple Failure: 1

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

Incident Date(s) 07-JAN-2008 Failure Mileage 89000 Failure Speed 0

**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)  Original Equipment  Prior Repair Failure Location: Miramar  
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 0 Number of Deaths 0 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).

TL\*THE CONTACT OWNS A 1999 LEXUS RX-300. THE CONTACT STATED THAT HE HEARD A CRACKLING NOISE WHEN HE APPLIED THE BRAKE THEN THE VEHICLE STALLED. THE CONTACT STATED THAT TEN MINUTES LATER HE WAS ABLE TO RESTART. HE TOOK THE VEHICLE TO THE DEALER AND THEY STATED THAT THE TRANSMISSION CAUSED THE FAILURE. AS OF JANUARY 7, 2008, THE DEALER HAD NOT REPAIRED THE VEHICLE. THE FAILURE MILEAGE WAS 89,000 AND CURRENT MILEAGE WAS 89,000.

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)**

Vehicle frequently lost power when while giving gas. moved slowly. Used emergency lights to drive safely to warn other drivers, of slow speed.

ATTACH ADDITIONAL SHEETS IF NECESSARY

US Department of Transportation

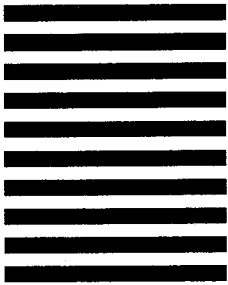
**National Highway Traffic Safety Administration**

1200 New Jersey Avenue SE, Washington, D.C. 20077-9382

Official Business  
Penalty for Private Use \$300



**NO POSTAGE NECESSARY IF MAILED IN THE UNITED STATES**



**BUSINESS REPLY MAIL**

FIRST-CLASS MAIL PERMIT NO. 1888 WASHINGTON, DC

POSTAGE WILL BE PAID BY ADDRESSEE

**US Department of Transportation  
National Highway Traffic Safety Administration  
Office of Defects Investigation, NVS-210  
1200 New Jersey Ave SE  
Washington, DC 20077-9382**



**Think your vehicle has a safety defect?**



**If so:  
Use the enclosed form to file a report.**

**or visit:  
www.safercar.gov**

**or call:  
Vehicle Safety Hotline  
888-327-4236**



Vehicle Owner's Questionnaire (VOQ)  
U.S. Department of Transportation  
National Highway Traffic Safety Administration

