



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 27-OCT-2008	Repository <input type="checkbox"/>
	Reference No. 10246795

OWNER INFORMATION (Type or Print)

Name			
Address			
City	BLACKLICK	State	OH
Zip Code			

Daytime Telephone Number	E-mail Address
Evening Telephone Number	N/A

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 11/1/08

VEHICLE INFORMATION

17 digit Vehicle Identification Number Located at bottom of windshield on driver's side 5TBJN3217Y	Make TOYOTA	Model TUNDRA	Model Year 2000
Date Purchased 08/20/00	Dealer's Name and Telephone Number TANSKY'S SAWMILL TOYOTA 614-766-4900		Engine: 3.4 Liter No: Cylinders V6
Original Owner <input checked="" type="checkbox"/>	Dealer's City 6300 SAWMILL RD DUBLIN	State OHIO	Zip Code 43017
Transmission Type 4 speed auto	<input type="checkbox"/> Antilock Brakes <input checked="" type="checkbox"/> Cruise Control	Powertrain -	Multiple Failure: -
			Incident Date(s) 11-SEP-2008

FAILED COMPONENT(S)/PART(S) INFORMATION

Vehicle Component Codes: 160000 STRUCTURE, 022000 SUSPENSION: REAR	Failure Mileage 181231	Failure Speed 0
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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)	<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 <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Fire <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Number of Persons Injured 0	Number of Deaths 0	Reported to Police N
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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 2000 TOYOTA TUNDRA. THE VEHICLE WAS TAKEN IN FOR REPAIRS AND THE TECHNICIAN OBSERVED THAT THE REAR SUBFRAME BRACKET WAS DAMAGED, WHICH COULD RESULT IN THE VEHICLE TURNING OVER. THE TECHNICIAN RECOMMENDED THAT THE VEHICLE BE INSPECTED AT AN AUTHORIZED DEALER. THE VEHICLE WAS TAKEN TO THE DEALER AND THEY STATED THAT THE SUBFRAME BRACKET WAS SEVERELY CRACKED. THE WARRANTY WAS EXPIRED AND THE DEALER REFUSED TO REPAIR THE VEHICLE. THE VEHICLE WAS TAKEN TO AN INDEPENDENT MECHANIC AND THE FAILURE WAS REPAIRED. THE CONTACT HAS NOTIFIED THE MANUFACTURER DUE TO THE SAFETY RISK INVOLVED. THE FAILURE MILEAGE WAS 181,231 AND CURRENT MILEAGE WAS 182,000.

I Agree to this statement.

12/NOV08

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 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.

GERMAIN



5777 Scarborough Blvd. Columbus, Ohio 43232
 Sales: (614) 868-0300 Parts & Service (614) 759-3026
 www.germaintoyotacolumbus.com

RECOMMENDED SERVICES

OPERATION	OPERATION DESCRIPTION	MO/MI	TOTAL	OPERATION	OPERATION DESCRIPTION	MO/MI	TOTAL

SERVICE HISTORY

DATE	REPAIR ORDER	MILEAGE	ADVISOR	TECHNICIAN	TYPE	OPERATION	OPERATION DESCRIPTION
09/14/06	522302C	148379	335	56	C	FDCITO	
				56	C	76TO	
				56	C	82DRUMTO	
07/14/06	517514C	145863	335	56	C	ITO	
				56	C	ELPTO	
				56	C	FDCITO	

SALESPERSON NO. _____

S E R V I C E

TERMS CASH <input type="checkbox"/> CREDIT CARD <input type="checkbox"/> CHARGE (PRIOR APPROVAL) <input type="checkbox"/> OTHER <input type="checkbox"/>	VEHICLE I.D. NO. 5TBJN3217YS	YEAR/MAKE/MODEL 00/TOYOTA/TUNDRA 4X2/RG 2WD V6	PRODUCTION DATE 06/29/00	STOCK NO.	LICENSE NO.	R. O. NO. 42921
CALL WHEN READY <input type="checkbox"/> YES <input type="checkbox"/> NO	BLACKLICK, OH	CUSTOMER NO.	SERVICE CONTRACT	DELIVERY DATE 08/20/00	DELIVERY MILES	SELLING DEALER NO.
IS CUSTOMER WAITING? <input type="checkbox"/> YES <input type="checkbox"/> NO	REFERENCE PHONE	BUSINESS PHONE	TURBO	M/MC TOZZ	AIR COND. Y	P.S. Y
APPOINTMENT <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	TIME RECEIVED 08:14am	DATE/TIME PROMISED 09/11/08 08:00pm	PRIORITY 3	TRANS A	MILEAGE 181,231	ADVISOR NO. 335
I hereby authorize the repair work herein set forth to be done along with the necessary material and agree that you are not responsible for loss or damage to vehicle or articles left in vehicle in case of fire, theft or any other cause beyond your control or for any delays caused by unavailability of parts or delays in parts shipments by the supplier or transporter. I hereby grant you and/or your employees permission to operate the vehicle herein described on streets, highways or elsewhere for the purpose of testing and/or inspection. An express mechanic's lien is hereby acknowledged on vehicle to secure the amount of repairs thereto.			ADVISOR BRENT E THOMAS			

JOB	ORIGINAL CUSTOMER ESTIMATE: TOTAL 0.00	ESTIMATE (UNDER OHIO LAW) YOU HAVE THE RIGHT TO AN ESTIMATE IF THE EXPECTED COST OF REPAIRS OR SERVICES WILL BE MORE THAN TWENTY-FIVE DOLLARS. INITIAL YOUR CHOICE:															
	X _____	WRITTEN ESTIMATE _____ ORAL ESTIMATE _____ I DO NOT REQUEST AN ESTIMATE _____															
	COMMENTS : WAIT CREATED 2008-09-10 02:06:00PM TAKEN BY TYLER TRIPPI	In the event that you, the customer, authorize commencement but do not authorize completion of a repair or service, a charge will be imposed for disassembly, reassembly or partially completed work. Such charge will be directly related to the actual amount of labor or parts involved in the inspection, repair or service.															
	1 C 45TOZ03 SUSPENSION CONCERN C/S: CUSTOMER STATES THE OIL CHANGE FACILITY THAT PERFORM MED HER OIL CHANGE NOTICED THE SPARE TIRE WAS HANGING LOW, FOUND THE CARRIER VERY RUSTED AND CRACKED IN TWO, BROKEN. PLEASE PROVIDE CUSTOMER WITH ESTIMATE, AND HAVE SERVICE MANAGER INSPECT VEHICLE AND ADVISE.	<table border="1"> <tr> <td>ORG. ESTIMATE</td> <td>CUST. ACCEPTANCE</td> <td>AUTH. ADDITIONS</td> <td>DATE</td> </tr> <tr> <td> </td> <td> </td> <td> </td> <td> </td> </tr> <tr> <td>\$</td> <td>\$</td> <td>\$</td> <td>BY</td> </tr> <tr> <td colspan="4">INITIAL HERE</td> </tr> </table> <p>THIS DEALERSHIP HEREBY EXPRESSLY DISCLAIMS ALL WARRANTIES, EITHER EXPRESS OR IMPLIED, INCLUDING ANY IMPLIED WARRANTY OF MERCHANTABILITY OR FITNESS FOR A PARTICULAR PURPOSE AND THIS DEALERSHIP NEITHER ASSUMES NOR AUTHORIZES ANY OTHER PERSON TO ASSUME FOR IT ANY LIABILITY IN CONNECTION WITH THE SALE.</p> <p>This Facility charges 8% of the Total Labor Charges, up to a Maximum of \$15.00, for Shop Materials.</p> <p>WE WILL OFFER TO RETURN TO YOU ALL REPLACED PARTS AS REQUIRED BY LAW UNLESS THEY ARE TO BE</p>	ORG. ESTIMATE	CUST. ACCEPTANCE	AUTH. ADDITIONS	DATE					\$	\$	\$	BY	INITIAL HERE		
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\$	\$	\$	BY														
INITIAL HERE																	

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CUSTOMER NO.	ADVISOR TYLER R. TRIPPIER	INVOICE DATE 09/11/08
LABOR RATE	MILEAGE 181,231	COLOR THUNDER GRA
BLACKLICK, OH	YEAR / MAKE / MODEL 00/TOYOTA/TUNDRA 4X2/RG 2WD V6	DELIVERY DATE 08/20/00
BUSINESS PHONE	VEHICLE I.D. NO. 5 T B J N 3 2 1 7 Y S	SELLING DEALER NO.
	F.T.E. NO.	P.O. NO.
	COMMENTS # 181231 SVZ-FE	MO: 181231

JOB# 1 CHARGES

LABOR
 J# 1 45TOZ03 SUSPENSION CONCERN TECH(S):56
 C/S: CUSTOMER STATES THE OIL CHANGE FACILITY THAT PERFORMED HER OIL CHANGE NOTICED THE SPARE TIRE WAS HANGING LOW. FOUND THE CARRIER VERY RUSTED AND CRACKED IN TWO. BROKEN. PLEASE PROVIDE CUSTOMER WITH ESTIMATE, AND HAVE SERVICE MANAGER INSPECT VEHICLE AND ADVISE.
 RUST/CORROSION
 ALL WARRANTIES ARE EXPIRED ON VEHICLE. SUGGEST CONTACTING AN INDEPENDENT BODY/FRAME SHOP ON REPAIRS

JOB# 1 TOTALS

JOB# 1 JOURNAL PREFIX TOCS JOB# 1 TOTAL 0.00

ESTIMATE
 CUSTOMER HEREBY ACKNOWLEDGES RECEIVING ORIGINAL ESTIMATE OF \$0.00 (+TAX)

COMMENTS
 WAIT CREATED 2008-09-10 02:06:00PM TAKEN BY TYLER TRIPPIER

TOTALS

 * TOTAL LABOR.... 0.00
 * TOTAL PARTS.... 0.00
 * [] CASH [] CHECK CK NO. [] * TOTAL SUBLET... 0.00
 * * TOTAL G.O.G.... 0.00
 * [] VISA [] MASTERCARD [] DISCOVER * TOTAL MISC CHG. 0.00
 * * TOTAL MISC DISC 0.00
 * [] AMER XPRESS [] OTHER [] CHARGE * TOTAL TAX..... 0.00
 * *

TOTAL INVOICE \$ 0.00

THIS DEALERSHIP WARRANTS ALL FACTORY PARTS & LABOR PERFORMED IN CONNECTION WITH THIS REPAIR FOR TWELVE (12) MONTHS OR TWELVE THOUSAND (12,000) MILES, WHICHEVER COMES FIRST. IF ANY FACTORY PART OR LABOR FAILS IN NORMAL SERVICE WITHIN THAT PERIOD, THE DEALERSHIP WILL REPLACE THE DEFECTIVE PARTS OR REPAIR ANY DEFECT IN WORKMANSHIP. ANY WARRANTY ON PARTS OR ACCESSORIES WHICH ARE NOT NEW FACTORY PARTS ARE MADE SOLELY BY THE MANUFACTURER OR SUPPLIER OF SUCH PARTS. THIS DEALERSHIP DISCLAIMS ALL WARRANTIES, EXPRESS OR IMPLIED, INCLUDING ANY IMPLIED WARRANTIES OF MERCHANTABILITY OR FITNESS FOR A PARTICULAR PURPOSE, & NEITHER ASSUMES NOR AUTHORIZES ANY OTHER PERSON TO ASSUME FOR IT ANY LIABILITY IN CONNECTION WITH THE SALE OF SAID PARTS & ACCESSORIES. THIS DEALERSHIP SHALL NOT BE LIABLE FOR ANY INCIDENTAL OR CONSEQUENTIAL DAMAGES OR COMMERCIAL LOSS ARISING OUT OF PURCHASE.

X _____
 CUSTOMER'S SIGNATURE

THANK YOU FOR YOUR BUSINESS!!

 CUSTOMER SIGNATURE

The Reynolds and Reynolds Company EPAINTIVE C0570012 Q (05/07)

BOB



SUMEREL TIRE CO., INC.

www.bobsumereltire.com

REMIT PAYMENTS TO

PO BOX 633096 CINCINNATI OH 45263-3096

Reynoldsburg 6971 E Broad St Columbus, OH 43213

Table with columns: ACCOUNT NO., CASH, INVOICE DATE, INVOICE NO.

TELEPHONE: VEH: 99 TOY TRUCK MIL: 010.189 LICENSE:

SOLD TO

BLACKLICK, OH

SHIP TO

Table with columns: CONTROL NO., ORDER DATE, P.O. NUMBER, SLS, TERMS, DATE SHIPPED, SHIPPED VIA, SLS ORDER

Main item table with columns: ITEM NO., DESCRIPTION, QUANTITY (ORDERED, B/O, SHIPPED), F.E.T., PRICE, EXTENSION

Ask me about our (WECARE) Loyalty program REGISTRATION CARD RECEIVED

Bob Sumarel Tire Co., Inc. is not liable for any consequential damage or guarantees, except those expressly implied by the manufacturers of said products.

TAXABLE: 977.01 SUB-TOTAL: 977.01 Tax 6.750% 65.90

EMARKS: I agree that BOB SUMEREL TIRE CO., Inc. shall have ownership of the items purchased and that I have the risk of damage to merchandise until such purchases are fully paid for.

CUSTOMER'S SIGNATURE

INVOICE TOTAL 1042.91

BST-030

10: 002 Merchant ID: 000154108969 Bank ID: 1340 10/22/08 Batch#: 000377 Retrieval Ref #: 000000002940843 MASTERCARD Entry Method: Swipe Appor Code: 816734 Inv #: 00000 Total: \$ 1,042.91 81,042.91 Customer Copy Sale

BOB SUMEREL TIRE CO. 6971 E BROAD ST COLUMBUS, OH 43213 (614) 759-7777











