



U.S. Department
of Transportation
2009 APR -1 PM 3:10
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

17-MAR-2009

Repository ☐

Reference No.
10262113

OWNER INFORMATION (Type or Print)

Name

Address

City

GREENVILLE

State

SC

Zip Code

Daytime Telephone Number

E-mail Address

Evening Telephone Number

Do you authorize NHTSA to provide a copy of this report to the manufacturer of your vehicle?
In the absence of an authorized agent, please provide the name or address to the vehicle manufacturer.

☒ YES

☒ NO

Signature of Owner

Date 03/22/09

VEHICLE INFORMATION

17 digit Vehicle Identification Number Located at bottom of windshield on driver's side

JTEBU17R240

Make

TOYOTA

Model

4RUNNER

Model Year

2004

Date Purchased

Dealer's Name and Telephone Number

Toyota of Greenville

Engine:

No: Cylinders

Fuel Type:

Original Owner

☐

Dealer's City

Greenville

State

SC

Zip Code

Transmission Type

☐ Antilock Brakes

Powertrain

Multiple Failure:

Incident Date(s)

12-MAR-2009

☐ Cruise Control

FAILED COMPONENT(S)/PART(S) INFORMATION

Vehicle Component Code: 141000 AIR BAGS: FRONTAL

Failure Mileage

66000

Failure Speed

35

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

1

Number of Deaths

0

Reported to Police

Y

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 2004 TOYOTA 4RUNNER. WHILE DRIVING 35 MPH, THE CONTACT LOST CONSCIOUSNESS AND CRASHED INTO A FENCE. THE FRONTAL AIR BAGS FAILED TO DEPLOY. THE CONTACT WAS INJURED AND SUSTAINED A BROKEN NECK. A POLICE REPORT WAS FILED. THE VEHICLE WAS INSPECTED BY THE INSURANCE ADJUSTER, WHO DETERMINED THAT THE VEHICLE WAS DESTROYED, BUT COULD NOT DETERMINE WHY THE AIR BAGS FAILED. THE CONTACT IS IN THE PROCESS OF NOTIFYING THE MANUFACTURER. THE FAILURE MILEAGE WAS 66,000.

I contacted Toyota at 1-800-331-4331. They took a report and provided me a claim number, case # 0903109452. Toyota also requested crash photos that I sent them at air bag photos @ toyota.com

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)

Blacked out while driving. Hit a split rail fence. Rails came through the front windshield. Took out 40' of post and rails. Car totalled because of frontal damage. The driver and passenger air bags failed to deploy.

ATTACH ADDITIONAL SHEETS IF NECESSARY

U.S. 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

GREENVILLE SC 296

24 MAR 2009 PM 1 T

NO POSTAGE
NECESSARY
IF MAILED
IN THE
UNITED STATES

BUSINESS REPLY MAIL

FIRST-CLASS MAIL

PERMIT NO. 1888

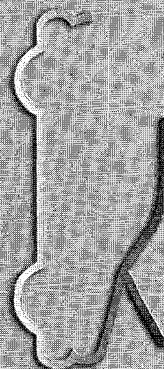
WASHINGTON, DC

POSTAGE WILL BE PAID BY ADDRESSEE

**US Department of Transportation
National Highway Traffic Safety Administration
Office of Defects Investigation, NVS-210
1200 New Jersey Avenue SE.
Washington, D.C. 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

