

 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	
U.S. Department of Transportation National Highway Traffic Safety Administration				Date Received JAN 28 2011 02-SEP-2010	
OWNER INFORMATION (Type or Print)				Repository ☐	
Name [REDACTED]				Reference No. 10353554	
Address [REDACTED]				Daytime Telephone Number [REDACTED]	
City TEXARCANA, State AR Zip Code [REDACTED]				Evening Telephone Number [REDACTED]	
The information you provide will be used to identify potential safety-related defects. We may share your information with the applicable vehicle manufacturer during an investigation or recall in accordance with the routine uses described in the agency's Privacy Act notice. See 49 FR 53971 (Sep. 3, 2004).					
VEHICLE INFORMATION					
17 digit Vehicle Identification Number Located at bottom of windshield on driver's side JT8BL69S710 [REDACTED]			Make LEXUS		Model GS430
					Model Year 2001
Date Purchased 9-11-2006		Dealer's Name and Telephone Number LEXAS OF SHREVEPORT/BOSS 318-741-1337		Engine: No: Cylinders	
Original Owner ☒		Dealer's City BOSSIER CITY		Fuel Type: G	
State LA		Zip Code 71111		8	
Transmission Type A		☒ Antilock Brakes ☒ Cruise Control		Incident Date(s) 18-JUL-2006	
FAILED COMPONENT(S)/PART(S) INFORMATION					
Vehicle Component Code: 060000 ENGINE AND ENGINE COOLING				Failure Mileage 65000	
				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:	
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	
				Number of Deaths	
				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 2001 LEXUS GS430. THE CONTACT STATED THAT THE ENGINE STALLED AND THE FAILURE HAD OCCURRED INTERMITTENTLY FOR FOUR YEARS. THE ONLY CONSTANT WAS THAT IT HAPPENED WHENEVER THE ACCELERATOR PEDAL WAS ENGAGED. THE DEALER WAS UNABLE TO DUPLICATE AND REPAIR THE PROBLEM. THE FAILURE MILEAGE WAS 65000 AND THE CURRENT MILEAGE WAS 112000.					
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.					