Form Approved: O.M.B. No. 2127-0008

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 ☐
03-MAY-2011	Reference No. 10398840

OWNER INFORMATION (Type or Print)

Name		Daytime Telephone Number	E-mail Address
Address	[redacted]	[redacted]	[redacted]
City: CYPRESS	State: CA	Zip Code: [redacted]	Evening Telephone Number

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	Make	Model	Model Year
4T1BE46KX7U[redacted]	TOYOTA	CAMRY	2007

Date Purchased	Dealer's Name and Telephone Number			Engine: No: Cylinders	Fuel Type:
OCT, 2006				4	GAS
Original Owner ☒	Dealer's City	State: CA	Zip Code		

Transmission Type		Powertrain	Multiple Failure:	Incident Date(s)
AUTO	☒ Antilock Brakes ☒ Cruise Control			15-SEP-2010

FAILED COMPONENT(S)/PART(S) INFORMATION

Vehicle Component Code: 130000 VISIBILITY	Failure Mileage	Failure Speed
	45000	

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			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 CONTACT STATED THAT THE DRIVER SIDE SUN VISOR CONTINUED TO FALL FROM ITS HOUSING AND BLOCK THE CONTACTS VISION OF THE ROADWAY. THE CONTACT STATED THAT THE FAILURE PROGRESSIVELY BECAME WORSE OVER TIME. THE CONTACT HAD TO PLACE TAPE ON THE SUN VISOR IN ORDER TO HOLD IT IN PLACE. THE MANUFACTURER WAS CONTACTED AND ADVISED THAT THE INTERNAL CLIP WAS WORN OUT AND WOULD NEED TO BE REPLACED. THE VEHICLE WAS NOT REPAIRED. THE APPROXIMATE FAILURE MILEAGE WAS 45,000. THE VIN WAS NOT AVAILABLE.

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