

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                                                                      |                                                    |                                                                      |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------|----------------------------------------------------|----------------------------------------------------------------------|
|  <b>DOT Auto Safety Hotline</b><br><b>Vehicle Owner's Questionnaire</b><br><b>To Report Vehicle Safety Defects</b><br><b>1-888-DASH-2-DOT</b><br><b>(1-888-327-4236)</b><br><b>INTERNET: www.nhtsa.dot.gov/hotline</b>                                                                                                                                                                                                                                                                             |                                                                                      | FOR AGENCY USE ONLY 100148                         |                                                                      |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                                                                      | Date Received<br><b>AUG 29 2011</b><br>07-JUL-2011 | Repository <input type="checkbox"/><br><br>Reference No.<br>10410934 |
| <b>OWNER INFORMATION (Type or Print)</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                                                                                      |                                                    |                                                                      |
| Name                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                                      | Daytime Telephone Number                           |                                                                      |
| Address                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                                                                      | Evening Telephone Number                           |                                                                      |
| City                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | State                                                                                | Zip Code                                           |                                                                      |
| WICHITA                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | KS                                                                                   |                                                    |                                                                      |
| 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).                                                                                                                                                                                                                                                                   |                                                                                      |                                                    |                                                                      |
| <b>VEHICLE INFORMATION</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                                                                                      |                                                    |                                                                      |
| 17 digit Vehicle Identification Number Located at bottom of windshield on driver's side                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                                                                      | Make                                               | Model                                                                |
| 4T1BE46K87U                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                                                                                      | TOYOTA                                             | CAMRY                                                                |
| Model Year                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                                                                                      | Engine:                                            | Fuel Type:                                                           |
| 2007                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                                      | No: Cylinders                                      | gas                                                                  |
| Date Purchased                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | Dealer's Name and Telephone Number                                                   |                                                    | State                                                                |
| 7-3-06                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | Eddy's Toyota                                                                        |                                                    | KS                                                                   |
| Original Owner                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | Dealer's City                                                                        | Zip Code                                           |                                                                      |
| <input checked="" type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | Wichita, KS                                                                          |                                                    |                                                                      |
| Transmission Type                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | <input checked="" type="checkbox"/> Antilock Brakes                                  | Powertrain                                         | Multiple Failure:                                                    |
| Automatic                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | <input checked="" type="checkbox"/> Cruise Control                                   |                                                    | Incident Date(s)                                                     |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                                                                      |                                                    | 01-MAY-2011                                                          |
| <b>FAILED COMPONENT(S)/PART(S) INFORMATION</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                                                                      |                                                    |                                                                      |
| Vehicle Component Code: 130000 VISIBILITY                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                                                                      | Failure Mileage                                    | Failure Speed                                                        |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                                                                      | 50000                                              | 0                                                                    |
| <b>ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A TIRE FAILURE</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                                                                      |                                                    |                                                                      |
| Tire Make                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | Tire Model (Name or Number)                                                          |                                                    | Tire Size (Example P215/65R15)                                       |
| DOT No. (Example: DOTM19ABC036)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | <input type="checkbox"/> Original Equipment<br><input type="checkbox"/> Prior Repair |                                                    | Failure Location:                                                    |
| Tire Component Code                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | Tire Failure Type:                                                                   |                                                    |                                                                      |
| <b>ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A CHILD SEAT FAILURE</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                                                                                      |                                                    |                                                                      |
| Make:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | Date Manufactured:                                                                   | Model No./Name:                                    |                                                                      |
| Seat Type:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | Installation System:                                                                 |                                                    |                                                                      |
| Child Seat Component Code:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | Failed Part:                                                                         |                                                    |                                                                      |
| <b>APPLICABLE INCIDENT INFORMATION</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                                                                      |                                                    |                                                                      |
| (Please describe in detail the incident(s), failure(s), crash(es), and injury(ies).)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                                      |                                                    |                                                                      |
| Crash                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | Fire                                                                                 | Number of Persons Injured                          | Number of Deaths                                                     |
| <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No                  |                                                    |                                                                      |
| Reported to Police                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                                      | N                                                  |                                                                      |
| Narrative Description of Incident(s), Crash(es), and Injury(ies).<br>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 THE SUN VISOR DOES NOT RETURN TO IT'S PROPER POSITION WHEN NOT IN USE AND IMPAIRED HER VISION WHILE DRIVING. THE CONTACT TOOK THE VEHICLE TO A DEALER WHO STATED THE SUN VISOR NEEDED TO BE REPLACED. THE CONTACT STATED THE SUN VISOR WAS INCREASING THE RISK OF A CRASH. THE FAILURE MILEAGE WAS 50,000.                                                                                                                                                                                                             |                                                                                      |                                                    |                                                                      |
| Include, if available: Police/Fire Department Report, Photos, and Repair Invoice. <span style="float: right;">ATTACH ADDITIONAL SHEETS IF NECESSARY</span>                                                                                                                                                                                                                                                                                                                                                                                                                          |                                                                                      |                                                    |                                                                      |
| 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)**

I know of 2 other family members who have also had to replace the drivers side visor. It is imperative for the driver to have a fully functioning visor for optimal vision during driving! We shouldn't have to pay \$150.00 to replace a defective visor; and then how long before it breaks?

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

WICHITA KS 672

01 AUG 2011 PM 3 1

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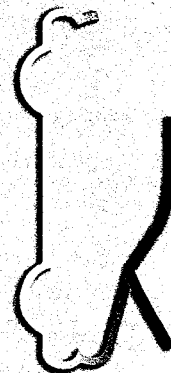
WASHINGTON, DC

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](http://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