



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 ☐

19-JUL-2011

SEP 2 2011

Reference No.

10413545

OWNER INFORMATION (Type or Print)

Name

Address

City

BROOKLYN BRONX

State

NY

Zip Code

Daytime Telephone Number

E-mail Address

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

4T1BE46K29U

Make

TOYOTA

Model

CAMRY

Model Year

2009

Date Purchased

12-19-2008

Dealer's Name and Telephone Number

FORDHAM TOYOTA 718, 367-0400

Engine:

No: Cylinders

4

Fuel Type:

GASOLINE

Original Owner

☒

Dealer's City

236 WEST FORDHAM RD

State

BRXNY

Zip Code

10468

Transmission Type

AUTOMAT

☒ Antilock Brakes

☒ Cruise Control

Powertrain

Multiple Failure:

Incident Date(s)

11-JUN-2011

FAILED COMPONENT(S)/PART(S) INFORMATION

Vehicle Component Code: 180000 VEHICLE SPEED CONTROL

Failure Mileage

55700

Failure Speed

20

ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A TIRE FAILURE

Tire Make

MICHELIN

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

1

Number of Deaths

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 OWNED A 2009 TOYOTA CAMRY. THE CONTACT STATED THAT WHILE DRIVING APPROXIMATELY 20 MPH, THE VEHICLE SUDDENLY ACCELERATED TO 55 MPH. AS THE DRIVER WAS ATTEMPTING TO BRAKE, THE VEHICLE CRASHED AND FLIPPED THREE TIMES BEFORE LANDING IN A DITCH. THE POLICE WERE NOTIFIED AND A REPORT WAS AVAILABLE. THE DRIVER SUFFERED MINOR INJURIES AND WAS TRANSPORTED TO THE HOSPITAL VIA AMBULANCE. THE VEHICLE WAS TOWED TO AN INDEPENDENT MECHANIC AND THEY DEEMED THE VEHICLE AS BEING DESTROYED. THE MANUFACTURER WAS NOT MADE AWARE OF THE FAILURE. THE FAILURE MILEAGE WAS APPROXIMATELY 55,700.

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.

06/16/2011 at 09:59 AM
23674

Job Nu:

NEIL'S AUTOMOTIVE, INC.
License #: 03271A Federal ID #: 222305231
AUTO BODY & REPAIRS
125 RAILROAD AVE.
18 BIRCH ST
RIDGEFIELD PARK, NJ 07660
(201) 440-2625 Fax: (201) 440-566.

PRELIMINARY ESTIMATE

Written By: NEIL MONAHAN #03271A
Adjuster:

Insured:
Owner:
Address:

Claim #
Policy #
Deductible
Date of Loss
Type of Loss
Point of Impact:

Day:
Evening:

Inspect
Location:

Insurance
Company:

2009 TOYO CAMRY SE 4-2.4L-FI 4D SED Int:
VIN: 4T1BE46K29U Lic: NY Prod Date:

Air Conditioning	Rear Defogger	Tilt Wheel
Cruise Control	Telescopic Wheel	Intermittent Wipers
Keyless Entry	Steering Wheel Controls	Dual Mirrors
Console/Storage	Overhead Console	Fog Lamps
Clear Coat Paint	Power Steering	Power Brakes
Power Windows	Power Locks	Power Driver Seat
Power Mirrors	Power Trunk/Gate Release	AM Radio
FM Radio	Stereo	Search/Seek
CD Player	Auxiliary Audio Connectio	Anti-Lock Brakes (4)
Driver Air Bag	Passenger Air Bag	Head/Curtain Air Bags
Front Side Impact Air Bag	4 Wheel Disc Brakes	Cloth Seats
Bucket Seats	5 Speed Transmission	Overdrive
Aluminum/Alloy Wheels		

NO.	OP.	DESCRIPTION	QTY	EXT. PRICE	LABOR	PAINT
1		ROOF				
2	Repl	Roof panel w/o XLE	1	594.04	19.5	3.0
3		Add for Clear Coat				1.2
4	Repl	W'shield header US built	1	79.14	1.5	0.4
5		Overlap Minor Panel				-0.2
6		Add for Clear Coat				0.1
7	Repl	Roof reinf #3	1	50.21	0.7	
8	Repl	Roof reinf #2 (HSS)	1	284.40	0.7	
9	Repl	RT Inner reinf #1 (HSS)	1	166.62		

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Job Number:

PRELIMINARY ESTIMATE

2009 TOYO CAMRY LE 4-2.4L-FI 4D SED Int:

Parts			4677.49
Parts Markup	\$ 3922.84	+25.0%	980.71
Body Labor	50.1 hrs @	\$ 45.00/hr	2254.50
Paint Labor	17.9 hrs @	\$ 45.00/hr	805.50
Frame Labor	2.5 hrs @	\$ 45.00/hr	112.50
Paint Supplies	17.9 hrs @	\$ 23.00/hr	411.70

SUBTOTAL			\$ 9242.40
Sales Tax	\$ 9242.40 @	7.0000%	646.97

GRAND TOTAL			\$ 9889.37
ADJUSTMENTS:			
Deductible			0.00

CUSTOMER PAY			\$ 0.00
INSURANCE PAY			\$ 9889.37

ANY PERSON WHO KNOWINGLY FILES A STATEMENT OF CLAIM CONTAINING ANY FALSE OR MISLEADING INFORMATION IS SUBJECT TO CRIMINAL AND CIVIL PENALTIES.

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Job Number:

PRELIMINARY ESTIMATE

2009 TOYO CAMRY SE 4-2.4L-FI 4D SED Int:

NO.	OP.	DESCRIPTION	QTY	EXT. PRICE	LABOR	PAINT
10	Repl	LT Inner reinf #1 (HSS)	1	166.62		
11	Repl	RT Drip molding	1	32.55	Incl.	
12	Repl	LT Drip molding	1	32.55	Incl.	
13	Repl	RT Drip molding clip	1	1.20		
14	Repl	LT Drip molding clip	1	1.20		
15	Repl	Headliner US built bisque	1	1098.03	Incl.	
16	Repl	RT Sunvisor US built bisque	1	101.49	Incl.	
17	Repl	LT Sunvisor US built bisque	1	101.49	Incl.	
18*	Rpr	RT Outer rail			<u>4.0</u>	1.4
19		Add for Clear Coat				0.3
20		FRONT DOOR				
21	Repl	LT Door shell	1	731.01	5.2	3.0
22		Overlap Major Non-Adj. Panel				-0.2
23		Add for Clear Coat				0.6
24	Repl	LT Mirror assy w/o heated, Japan built green	1	169.27	Incl.	0.6
25		Overlap Minor Panel				-0.2
26		Add for Clear Coat				0.1
27	Repl	LT Door glass Toyota US built	1	325.45	Incl.	
28		QUARTER PANEL				
29*	Rpr	RT Quarter panel			<u>4.0</u>	2.4
30		Overlap Major Adj. Panel				-0.4
31*		Add for Clear Coat				0.4
32*	Rpr	LT Quarter panel			<u>8.0</u>	2.4
33		Overlap Major Adj. Panel				-0.4
34*		Add for Clear Coat				0.4
35		WINDSHIELD				
36	Repl	Windshield NAGS, w/o auto dimming inside mirror	1	244.20	Incl.	
37		WHEELS				
38	Repl	LT/Front Wheel cover type A - "McKechnie" US built	1	76.76		
39	Repl	LT/Rear Wheel cover type A - "McKechnie" US built	1	76.76		
40	Repl	LT/Front Wheel, steel 16", type A US built	1	153.50	m 0.3	
41#	Repl	Continental 215/60 R16	1	145.00		
42		MISCELLANEOUS OPERATIONS				
43*	Repl	Cover car/bag	1	<u>6.00</u>	0.2	
44#		HAZ WASTE REMOVAL	1	<u>6.00</u>		
45#		Mount & Measure	1		2.5 F	
46#		Rough Out & SQUARE BODY	1		6.0	
47#		Urethane Kit	1	22.00		
48#		Rust Proofing	1	12.00		3.0
49#		Color Blends	1			
Subtotals ==>				4677.49	52.6	17.9

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Job Number:

PRELIMINARY ESTIMATE

2009 TOYO CAMRY SE 4-2.4L-FI 4D SED Int:

Estimate based on MOTOR CRASH ESTIMATING GUIDE. Unless otherwise noted all items are derived from the Guide ARM8522, CCC Data Date 05/02/2011, and the parts selected are OEM-parts manufactured by the vehicles Original Equipment Manufacturer. OEM parts are available at OE/Vehicle dealerships. OPT OEM (Optional OEM) or ALT OEM (Alternative OEM) parts are OEM parts that may be provided by or through alternate sources other than the OEM vehicle dealerships. OPT OEM or ALT OEM parts may reflect some specific, special, or unique pricing or discount. OPT OEM or ALT OEM parts may include "Blemished" parts provided by OEM's through OEM vehicle dealerships. Asterisk (*) or Double Asterisk (**) indicates that the parts and/or labor information provided by MOTOR may have been modified or may have come from an alternate data source. Tilde sign (~) items indicate MOTOR Not-Included Labor operations. Non-Original Equipment Manufacturer aftermarket parts are described as AM, Qual Repl Parts or Comp Repl Parts which stands for Competitive Replacement Parts. Used parts are described as LKQ, Qual Recy Parts, RCY, or USED. Reconditioned parts are described as Recond. Recored parts are described as Recore. NAGS Part Numbers and Benchmark Prices are provided by National Auto Glass Specifications. Labor operation times listed on the line with the NAGS information are MOTOR suggested labor operation times. NAGS labor operation times are not included. Pound sign (#) items indicate manual entries. Some 2010 vehicles contain minor changes from the previous year. For those vehicles, prior to receiving updated data from the vehicle manufacturer, labor and parts data from the previous year may be used. The CCC ONE estimator has a complete list of applicable vehicles. Parts numbers and prices should be confirmed with the local dealership. THE FOLLOWING IS A LIST OF ABBREVIATIONS OR SYMBOLS THAT MAY BE USED TO DESCRIBE WORK TO BE DONE OR PARTS TO BE REPAIRED OR REPLACED: MOTOR ABBREVIATIONS/SYMBOLS: D=DISCONTINUED PART A=APPROXIMATE PRICE LABOR TYPES: B=BODY LABOR D=DIAGNOSTIC E=ELECTRICAL F=FRAME G=GLASS M=MECHANICAL P=PAINT LABOR S=STRUCTURAL T=TAXED MISCELLANEOUS X=NON TAXED MISCELLANEOUS PATHWAYS: ADJ=ADJACENT ALGN=ALIGN A/M=AFTERMARKET BLND=BLEND CAPA=CERTIFIED AUTOMOTIVE PARTS ASSOCIATION D&R=DISCONNECT AND RECONNECT EST=ESTIMATE EXT. PRICE=UNIT PRICE MULTIPLIED BY THE QUANTITY INCL=INCLUDED MISC=MISCELLANEOUS NAGS=NATIONAL AUTO GLASS SPECIFICATIONS NON-ADJ=NON ADJACENT O/H=OVERHAUL OP=OPERATION NO=LINE NUMBER QTY=QUANTITY QUAL RECY=QUALITY RECYCLED PART QUAL REPL=QUALITY REPLACEMENT PART COMP REPL PARTS=COMPETITIVE REPLACEMENT PARTS RECOND=RECONDITION REFN=REFINISH REPL=REPLACE R&I=REMOVE AND INSTALL R&R=REMOVE AND REPLACE RPR=REPAIR RT=RIGHT SECT=SECTION SUBL=SUBLET LT=LEFT W/O=WITHOUT W/_=WITH/_ SYMBOLS: #=MANUAL LINE ENTRY *=OTHER [IE..MOTORS DATABASE INFORMATION WAS CHANGED] **=DATABASE LINE WITH AFTERMARKET, N=NOTES ATTACHED TO LINE. OPT OEM=ORIGINAL EQUIPMENT MANUFACTURER PARTS EITHER OPTIONALLY SOURCED OR OTHERWISE PROVIDED WITH SOME UNIQUE PRICING OR DISCOUNT. NWCPP=NATIONWIDE CRASH PARTS PROGRAM.

CCC Pathways - A product of CCC Information Services Inc.

New Jersey Police Crash Investigation Report										☒ Reportable		☐ Non-Reportable		☐ Change Report		
96	01	1 Case Number		11-7434		10 Crash Occurred On: Rt 46 West		11 Speed Limit		US 46		71.01		118a	01	
97	01	2 Police Dept of		Ridgefield Park 01		3 Station/Precinct		12 Route No.		Suffix		13 Milepost		118b	51	
98	01	3 Date of Crash		06/11/11		5 Day of Week		6 Time		7 Municipality		8 Total Killed		9 Total Injured	119a	119b
99	02	4 Date of Crash		06/11/11		5 Day of Week		6 Time		7 Municipality		8 Total Killed		9 Total Injured	119a	119b
100	04	23 Veh No		24 Policy No		25 Ins Code		26 Driver's First Name		27 Initial		28 Last Name		29 Sex	120	01
101	02	23 Veh No		24 Policy No		25 Ins Code		26 Driver's First Name		27 Initial		28 Last Name		29 Sex	120	01
102	02	23 Veh No		24 Policy No		25 Ins Code		26 Driver's First Name		27 Initial		28 Last Name		29 Sex	120	01
103	01	23 Veh No		24 Policy No		25 Ins Code		26 Driver's First Name		27 Initial		28 Last Name		29 Sex	120	01
104	01	23 Veh No		24 Policy No		25 Ins Code		26 Driver's First Name		27 Initial		28 Last Name		29 Sex	120	01
105	10	23 Veh No		24 Policy No		25 Ins Code		26 Driver's First Name		27 Initial		28 Last Name		29 Sex	120	01
106	-	37 City		State		Zip		66 Number and Street		67 City		State		Zip	124	16
107	-	37 City		State		Zip		66 Number and Street		67 City		State		Zip	124	16
108	01	38 Make		39 Model		40 Color		41 Year		42 State		43 VIN		44 Expires	125	-
109	-	38 Make		39 Model		40 Color		41 Year		42 State		43 VIN		44 Expires	125	-
110	01	38 Make		39 Model		40 Color		41 Year		42 State		43 VIN		44 Expires	125	-
111	-	38 Make		39 Model		40 Color		41 Year		42 State		43 VIN		44 Expires	125	-
112	06	38 Make		39 Model		40 Color		41 Year		42 State		43 VIN		44 Expires	125	-
113	-	38 Make		39 Model		40 Color		41 Year		42 State		43 VIN		44 Expires	125	-
114	-	38 Make		39 Model		40 Color		41 Year		42 State		43 VIN		44 Expires	125	-
115	-	38 Make		39 Model		40 Color		41 Year		42 State		43 VIN		44 Expires	125	-
116	04	38 Make		39 Model		40 Color		41 Year		42 State		43 VIN		44 Expires	125	-
117	-	38 Make		39 Model		40 Color		41 Year		42 State		43 VIN		44 Expires	125	-
135 Crash Description															126	11
Driver states he was negotiating curve when he could no longer control the vehicle and it drove off the road to the right. Vehicle then flipped over and landed on it's roof.															126	11
* 644 Global Liberty Ins Co of NY Policy Number FH [redacted] Exp 03/12															126	11
136 Damage To Other Property															126	11
137 Charge															126	11
138 Summons No.															126	11
139 Charge															126	11
140 Summons No.															126	11
141 Officer's Signature															126	11
142 Badge No.															126	11
143 Reviewed By															126	11
144 Case Status															126	11
145 Pending															126	11
146 Complete															126	11
Names & Addresses of Occupants - If Deceased, Date & Time of Death															126	11
VI 01 01 04 64 M 08 08 2 09 04 - 5204 See Driver 1															126	11
															126	11
															126	11
															126	11
															126	11

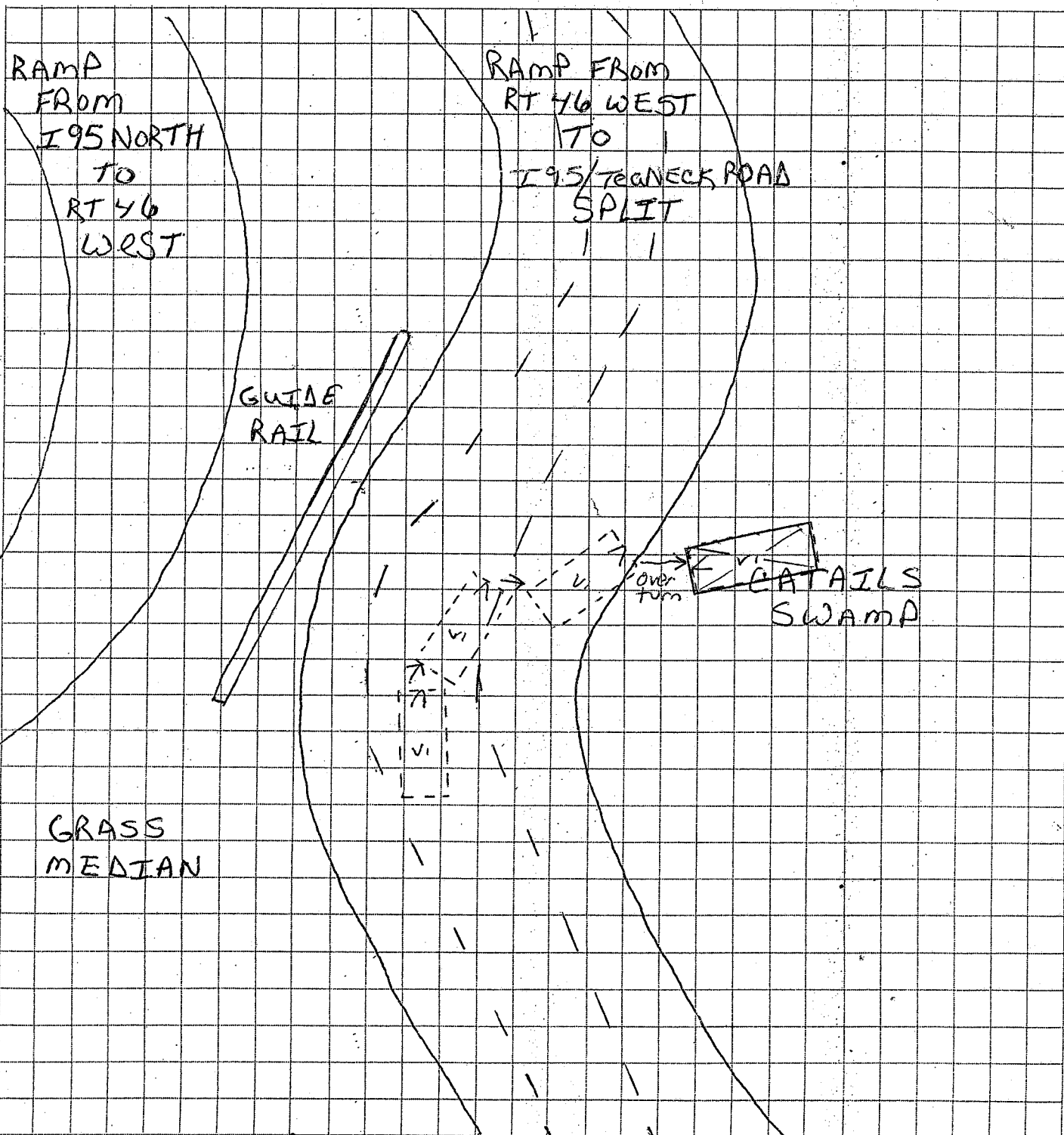
New Jersey Police Crash Investigation Report

Police Dept: RIDGEFIELD PK Code: 01

Motor Vehicle Crash Diagram

Station: Case No: 11-7434

134 Crash Diagram (NOT TO SCALE)

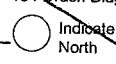


ptl Maden

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New Jersey Police Crash Investigation Report

☐ Reportable ☐ Non-Reportable ☒ Change Report

1 Case Number 11-7434		10 Crash Occurred On: _____		11 Speed Limit _____	
2 Police Dept of Ridgefield Park 01		3 Station/Precinct _____		4 Date of Crash mm dd yy 06 11 11	
5 Day of Week Su M Tu W Th F Sa Sa		6 Time (use 2400 hrs) 0642		7 Municipality Code 0250	
8 Total Killed _____		9 Total Injured _____		19 To: _____	
20 Route Name _____		21 Latitude _____		22 Longitude _____	
23 Veh No 24 Policy No. _____		25 Ins Code _____		53 Veh No 54 Policy No. _____	
26 Driver's First Name _____		27 Number and Street _____		28 City _____	
29 Sex _____		30 Eyes _____		31 State _____	
32 Drivers License No. _____		33 DOB mm dd yy _____		34 Expires mm yy _____	
35 Owner's First Name _____		36 Number and Street _____		37 City _____	
38 Make _____		39 Model _____		40 Color _____	
41 Year _____		42 Plate No. _____		43 State _____	
44 VIN _____		45 Expires _____		46 Vehicle Removed To ☐ Driven ☐ Left at Scene ☐ Towed ☐ Impound ☐ Disabled	
47 Authority _____		48 Alcohol/Drug Test Given: ☐ No ☐ Yes ☐ Refused Type: ☐ Breath ☐ Blood ☐ Urine Results: 0.____ % ☐ Pending		49 Hazardous Material On Board ☐ Spill ☐ Name or Placard No. _____	
50 Carrier No. ☐ USDOT ☐ Other *		51 Commercial Vehicle Weight ☐ ≤ 10,000 lbs ☐ 10,001 - 26,000 lbs ☐ ≥ 26,001 lbs		52 Carrier name _____	
55 Ins Code _____		56 Driver's First Name _____		57 Number and Street _____	
58 City _____		59 Sex _____		60 Eyes _____	
61 State _____		62 Drivers License No. _____		63 DOB mm dd yy _____	
64 Expires mm yy _____		65 Owner's First Name _____		66 Number and Street _____	
67 City _____		68 Make _____		69 Model _____	
70 Color _____		71 Year _____		72 Plate No. _____	
73 State _____		74 VIN _____		75 Expires _____	
76 Vehicle Removed To ☐ Driven ☐ Left at Scene ☐ Towed ☐ Impound ☐ Disabled		77 Authority _____		78 Alcohol/Drug Test Given: ☐ No ☐ Yes ☐ Refused Type: ☐ Breath ☐ Blood ☐ Urine Results: 0.____ % ☐ Pending	
79 Hazardous Material On Board ☐ Spill ☐ Name or Placard No. _____		80 Carrier No. ☐ USDOT ☐ Other *		81 Commercial Vehicle Weight ☐ ≤ 10,000 lbs ☐ 10,001 - 26,000 lbs ☐ ≥ 26,001 lbs	
82 Carrier name _____		134 Crash Diagram (NOT TO SCALE) 		135 Crash Description Driver states car accelerated on it's own.	
136 Damage To Other Property _____					
137 Charge ☐ Multiple Charges		138 Summons No. _____		139 Charge ☐ Multiple Charges	
140 Summons No. _____		141 Officer's Signature P. Madan		142 Badge No. 152	
143 Reviewed By P. Madan		144 Case Status ☐ Pending ☐ Complete		145 Names & Addresses of Occupants - If Deceased, Date & Time of Death	

													132		131		☐ Pending ☐ Complete	
83	84	85	86	87	88	89	90	91	92	93	94	95	Names & Addresses of Occupants - If Deceased, Date & Time of Death					



Bronx, NY



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

200779382

