

INFORMATION ACT (FOIA), 5 U.S.C. 552(B)(6)

 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 21-JUL-2011 AUG 3 2011		Repository ☐ Reference No. 10413992	
OWNER INFORMATION (Type or Print)							
Name				Daytime Telephone Number		E-mail Address	
Address				Evening Telephone Number			
City		State		Zip Code			
WALTHAM		MA					
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	
4T1BK46K47U				TOYOTA		CAMRY	
Date Purchased		Dealer's Name and Telephone Number				Model Year	
3/14/07		Acton Toyota 978-263-1500				2007	
Original Owner ☒		Dealer's City		State		Engine:	
		Acton		MA		No: Cylinders	
				Zip Code		6	
				01720		Gas	
Transmission Type		☒ Antilock Brakes		Powertrain		Multiple Failure:	
Auto		☒ Cruise Control				Incident Date(s)	
						07-JUL-2011	
FAILED COMPONENT(S)/PART(S) INFORMATION							
Vehicle Component Code: 180000 VEHICLE SPEED CONTROL						Failure Mileage	
						20000	
						27000	
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	
				0		0	
				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 2007 TOYOTA CAMRY. THE CONTACT STATED WHILE MOVING SLOWLY IN TRAFFIC AT 1 MPH, THE VEHICLE RPM INCREASED EXCESSIVELY. HE STARTED TO DEPRESS THE BRAKE PEDAL FIRMLY SO THAT THE VEHICLE WOULD NOT ACCELERATE. THE RPM STARTED TO SLOWLY DECREASE. THE VEHICLE WAS TAKEN TO THE DEALER WHO STATED THAT THEY COULD NOT FIND ANY PROBLEMS WITH THE VEHICLE SPEED CONTROL, AND ALL FIXES WERE IN PLACE FOR ALL THE RECALLS THAT PERTAINS TO THE VEHICLE. THEY INFORMED HIM THAT THEY PUT A BRAKE TO IDLE FIX IN, SO AS SOON AS THE VEHICLE RPM INCREASED, HE COULD DEPRESS THE BRAKE AND THE VEHICLE WOULD GO TO IDLE. THIS FIX DID NOT WORK. THE MANUFACTURER WAS CONTACTED AND A CLAIM WAS FILE. A REPRESENTATIVE WOULD BE SENT OUT TO THOROUGHLY INSPECT HIS VEHICLE. THE FAILURE MILEAGE WAS 30,000.							
See more detailed description on attached service invoice.							
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.							

CUSTOMER #: 26843

313412



LEXINGTON TOYOTA, Inc.

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Lexington, MA 02420

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INVOICE

WALTHAM, MA

HOME: [REDACTED] CONT: [REDACTED]

BUS: [REDACTED] CELL: [REDACTED]

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SERVICE ADVISOR: 75 CHRISTINA OSSINO

COLOR	YEAR	MAKE/MODEL	VIN	LICENSE	MILEAGE IN/OUT	TAG
RED	07	TOYOTA CAMRY	4T1BK46K47U [REDACTED]	[REDACTED]	29139/29139	
DEL. DATE	PROD. DATE	WARR. EXP.	PROMISED	PO. NO.	RATE	PAYMENT
01JAN07 DD			17:30 05JUL11		0.00	CASH
R.O. OPENED	READY	OPTIONS: ENG:3.5 LITER DOHC TRN:A				
11:06 05JUL11	17:31 05JUL11					

LINE OPCODE TECH TYPE HOURS LIST NET TOTAL

A C/S WHEN IN STOP&GO TRAFFIC, LIGHTLY PRESSED THE ACCELERATOR, THEN PUT FOOT ON THE BRAKE. WHILE PRESSING THE BRAKE, NOTICED VEH WAS EDGING FORWARD, CUST PUT FOOT HARDER ON THE BRAKE&ENGINE REVED VERY HIGH FOR ABOUT 5 SECONDS THEN DIEDDOWN. PLEASE CHECK AND ADVISE.

11 ENGINE REPAIR

615 ISP

(N/C)

PARTS: 0.00 LABOR: 0.00 OTHER: 0.00 TOTAL LINE A: 0.00

CASE# 1107050911 TECH ROAD TESTED VEHICLE, COULD NOT DUPLICATE CONCERN. PERFORMED HEALTH CHECKS- NO CODES STORES. ALL SYSTEMS TESTING OKAY. BRAKE PAD WEAR: FRONT 8MM. REAR: 8MM TIRE WEAR: FRONT 6/32, REAR 5/32.



LEXINGTON TOYOTA, Inc.

Thank you for your Business!

DESCRIPTION	TOTALS
LABOR AMOUNT	0.00
PARTS AMOUNT	0.00
GAS, OIL, LUBE	0.00
SUBLET AMOUNT	0.00
MISC. CHARGES	0.00
TOTAL CHARGES	0.00
LESS INSURANCE	0.00
SALES TAX	0.00
PLEASE PAY THIS AMOUNT	0.00