



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

SEP 11 2012
27-JUL-2012

Repository ☐

Reference No.
10467911

OWNER INFORMATION (Type or Print)

Name [REDACTED]
Address [REDACTED]
City CIALES State PR Zip Code [REDACTED]

Daytime Telephone Number

Evening Telephone Number

E-mail Address

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

2T1KR32E43C [REDACTED]

Make
TOYOTA

Model
MATRIX

Model Year
2003

Date Purchased

Dealer's Name and Telephone Number

Engine:

Fuel Type:

Original Owner ☐

Dealer's City:

State

Zip Code

No. Cylinders

4

Gasoline

Transmission Type

☐ Antilock Brakes

Powertrain

Multiple Failure:

Incident Date(s)

25-JUL-2012

☐ Cruise Control

FAILED COMPONENT(S)/PART(S) INFORMATION

Vehicle Component Code: 150000 SEAT BELTS

Failure Mileage
98514

Failure Speed

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

0

Number of Deaths

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).

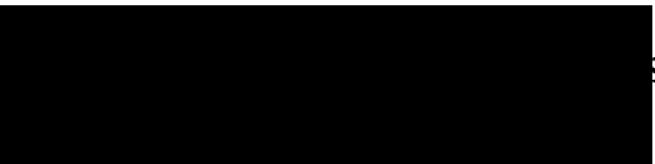
TL* THE CONTACT OWNS A 2003 TOYOTA MATRIX. THE CONTACT STATED THAT THE DRIVER SIDE SEAT BELT EXPLODED AND FRACTURED INTO PIECES. THE SEAT BELT WARNING LIGHTS WERE ILLUMINATED AND COULD NOT BE TURNED OFF. IN ADDITION, THE POWER WINDOWS WOULD OPEN INDEPENDENTLY AND COULD NOT BE OPERATED MANUALLY. THE DEALER WAS NOTIFIED WHO DIAGNOSED THE FAILURE AS THE INSIDE CYLINDER OF THE SEAT BELT CONTROL BEING DEFECTIVE AND OFFERED NO ASSISTANCE. THE MANUFACTURER WAS NOT NOTIFIED. THE FAILURE AND THE CURRENT MILEAGE WAS 98,514. THE VIN WAS NOT AVAILABLE.

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.

8-27-2012



Rivers, P.R.

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT
OF THE RETURN ADDRESS, FOLD AT DOTTED LINE
CERTIFIED MAIL



7009 2250 0003 1671 3677

W48-224



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U.S. Department of Transportation
National Highway Traffic Safety Administration
Office of Defects Investigation, NHTSA
1200 NEW JERSEY AVENUE SE.
WASHINGTON, DC 20077-9382

**RETURN RECEIPT
REQUESTED**