

 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	
OWNER INFORMATION (Type or Print) Name: [REDACTED] Address: [REDACTED] City: DEL RAY BEACH State: FL Zip Code: [REDACTED]		Date Received: NOV 13 2012 02-OCT-2012		Repository ☐ Reference No. 10478261	
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 JT HBS 46 G 472 [REDACTED]		Make LEXUS		Model ES350	
Date Purchased 12/2007		Dealer's Name and Telephone Number		Model Year 2007	
Original Owner ☒		Dealer's City MARGATE		Engine: No: Cylinders	
State FL Zip Code		Transmission Type ☐ Antilock Brakes ☐ Cruise Control		Powertrain Multiple Failure: Incident Date(s) 01-AUG-2012	
FAILED COMPONENT(S)/PART(S) INFORMATION					
Vehicle Component Code: 162000 STRUCTURE: BODY				Failure Mileage 19000	
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 2007 LEXUS ES350. THE CONTACT STATED THE DASHBOARD BEGAN TO MELT. THE VEHICLE WAS TAKEN TO THE DEALER FOR DIAGNOSTIC TESTING. THE MANUFACTURER WAS MADE AWARE OF THE FAILURE. THE VEHICLE WAS NOT REPAIRED AND THE VIN WAS UNKNOWN. THE FAILURE MILEAGE WAS 19,000 AND THE CURRENT MILEAGE WAS 21,000.					
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.					