INFORMATION Redacted PURSUANT TO THE FREEDOM OF INFORMATION ACT (FOIA), 5 U.S.C . 552(B)(6)

Form Approved: O.M.B. No. 2127-0008

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
JUN 24 2013 30-APR-2013	
	Reference No. 10510033

OWNER INFORMATION (Type or Print)

Name	[redacted]	Daytime Telephone Number	E-mail Address
Address	[redacted]	[redacted]	[redacted]
City MONSEY	State NY	Zip Code [redacted]	Evening Telephone Number [redacted]

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	Model Year
JTDKB20U777[redacted]	TOYOTA	PRIUS	2007

Date Purchased	Dealer's Name and Telephone Number			Engine:	Fuel Type:
3-5-2007	PRESTIGE TOYOTA, 201-825-2700			No: Cylinders 4	Other GAS + ELECTRIC
Original Owner ☒	Dealer's City RAMSEY	State NJ	Zip Code 07446		

Transmission Type		Powertrain	Multiple Failure:	Incident Date(s)
CVT	☒ Antilock Brakes ☒ Cruise Control		1	29-APR-2013

FAILED COMPONENT(S)/PART(S) INFORMATION

Vehicle Component Code: BRAKES (PWS)	Failure Mileage	Failure Speed
	112000	7

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: DOTMAL9ABC036)	☐ 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	Fire	Number of Persons Injured	Number of Deaths	Reported to Police
☒ Yes ☐ No	☐ Yes ☒ No	0	0	~~X~~ YES

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 PRIUS. THE CONTACT STATED THAT WHILE DRIVING 7 MPH AND PULLING INTO A PARKING SPACE, HE ATTEMPTED TO ENGAGE THE BRAKES AND IT FAILED TO STOP THE VEHICLE. THE CONTACT MENTIONED THAT THE VEHICLE KEPT MOVING FORWARD, WENT OVER A DIVIDER, AND CRASHED INTO TWO VEHICLES. A POLICE REPORT WAS FILED AND NO INJURIES WERE REPORTED. THE VEHICLE WAS NOT TAKEN TO THE DEALER. THE MANUFACTURER WAS ~~NOT~~ MADE AWARE OF THE FAILURE. THE VEHICLE WAS ~~NOT~~ REPAIRED. THE FAILURE AND CURRENT MILEAGE WAS 112,000. *TR

THE MANUFACTURER (FRONT BUMPER) WAS NOTIFIED.
THE VEHICLE WAS REPAIRED.
A TOYOTA REPRESENTATIVE INSPECTED THE VEHICLE BEFORE IT WAS REPAIRED (ENGINEERING ANALYSIS, CYNTHIA, 586-578-7366)

↑ FRONT BUMPER

Include, if available: Police/Fire Department Report, Photos, and Repair Invoice. ATTACH ADDITIONAL SHEETS IF NECESSARY

Image sent to Cynthia on 5-4-2013

TOYOTA

Toyota Motor Sales, U.S.A., Inc.
19001 S. Western Avenue
Torrance, CA 90501

TOYOTA EDR DATA IMAGING AUTHORIZATION AND CONSENT

I am the owner/lessor/lessee or the authorized representative of the owner/lessor/lessee of a 2007 Model Year Toyota / Lexus / Scion Prius _____, VIN ☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐ (the "Subject Vehicle"). JTDKB20U777[redacted]

I consent and authorize representatives of Toyota Motor Sales, U.S.A., Inc. or other persons designated by Toyota, to image data from the Subject Vehicle's Event Data Recorder (EDR) and/or any other computer memory contained within the Subject Vehicle. This information or data will be used for improving motor vehicle safety through crash investigation and analysis.

In doing so, I acknowledge and agree voluntarily to waive any privacy rights to the information or data imaged from the subject vehicle's EDR or other computer memory.

[redacted]
Name (please print)

OWNER
Status (i.e., owner, lessor, lessee, representative, attorney, etc.)

Signed: [redacted]

Dated: 5-3-2013

(Additional owners/lessees, please sign below. Required in Arkansas and Oregon.)

_____
Signed

_____
Print Name Date

New Jersey Police Crash Investigation Report

Page 01 of 02 | ☐ Fatal | ☒ Reportable | ☐ Non-Reportable | ☐ Change Report

1 Case Number: 13-118
2 Police Dept of: MONTVALE | Code: 01
3 Station/Precinct: WEST
4 Date of Crash (mm dd yy): 04 29 13
5 Day of Week: Su (M) Tu W Th F Sa
6 Time (use 2400 hrs): 1420
7 Municipality Code: 0236
8 Total Killed: —
9 Total Injured: —
10 Crash Occurred On: LOT OF 300 W. GRAND AVE (Road Name) | W (Dir) | 11 Speed Limit: — —
☐ At Intersection with ☒ Feet ☐ Miles: 200 (14 15) | ☐ N ☒ E ☐ S ☐ W of: MERCEDES DRIVE (16)
12 Route No. | Suffix | 13 Milepost | 18 Speed Limit: 25
17 Cross Road Name
19 ☐ To: ☐ Ramp ☐ From:
20 Route/Name | ☐ NB ☐ EB ☐ SB ☐ WB
21 Latitude | 22 Longitude

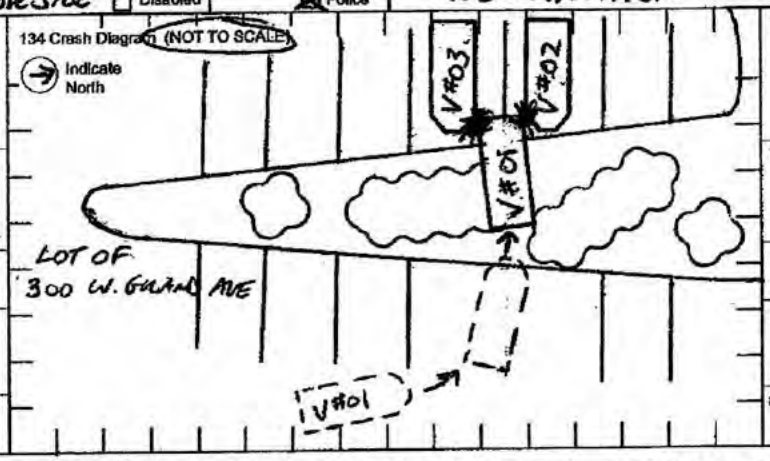
118a: 02 | 118b: —
119a: 25 | 119b: —

Vehicle 01
23 Veh No: 01
24 Policy No.: [redacted]
25 Ins Code: *
☐ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp to Emergency ☐ Hit & Run
26 Driver's First Name: [redacted] | Initial | Last Name
27 Number and Street: [redacted]
28 City: MONSEY | State: NY | Zip: [redacted]
29 Sex: M
30 Eyes: 02
31 State: NY
32 Drivers License No: [redacted]
33 DOB (mm dd yy):
34 Expires (mm yy): 12 19
35 Owner's First Name | Initial | Last Name
☒ Same As Driver
36 Number and Street:
37 City | State | Zip
38 Make: TOYOTA
39 Model: PRIUS
40 Color: GRAY
41 Year: 2007
42 Plate No.: [redacted]
43 State: NY
44 VIN: JTDKB20U777 [redacted]
45 Expires: 03 15
46 Vehicle Removed To: ☐ Driven ☐ Left at Scene ☒ Towed ☐ Impound ☐ Disabled | 47 Authority: ☐ Owner ☐ Driver ☒ Police
BERGEN BROOKSIDE

Vehicle 02
53 Veh No: 02
54 Policy No.: [redacted]
55 Ins Code: 148
☒ Parked ☐ Ped ☐ Pedalcyclist ☐ Resp to Emergency ☐ Hit & Run
56 Driver's First Name | Initial | Last Name
57 Number and Street:
58 City | State | Zip
59 Sex:
60 Eyes:
61 State:
62 Drivers License No:
63 DOB (mm dd yy):
64 Expires (mm yy):
65 Owner's First Name | Initial | Last Name
☐ Same As Driver
66 Number and Street: [redacted]
67 City: DUMONT | State: NJ | Zip: [redacted]
68 Make: TOYOTA
69 Model: CAMERY
70 Color: GRAY
71 Year: 1999
72 Plate No.: [redacted]
73 State: NJ
74 VIN: 4T1BF28KXXU [redacted]
75 Expires: 01 14
76 Vehicle Removed To: ☒ Driven ☐ Left at Scene ☐ Towed ☐ Impound ☐ Disabled | 77 Authority: ☒ Owner ☒ Driver ☐ Police
DESTINATION

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

134 Crash Diagram (NOT TO SCALE)
Indicate North



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

126: 11 | 127: 11 | 128a: 56 | 128b: 07 | 128c: 28 | 128d: 28 | 129a: 26 | 129b: — | 129c: — | 129d:

135 Crash Description:
* BOX 25: GEICO, NY INS, 1 GEICO PLAZA, WASHINGTON DC, 20076-0001
* BOX 118a: DRIVER #01 CLAIMED THAT WHEN HE HIT THE BREAK PEDAL, THE VEHICLE ACCELERATED.
DRIVER #01 STATED THAT WHILE PARKING IN A PARKING SPOT IN THE LOT OF 300 W. GRAND AVENUE, AS HE APPLIED THE BREAK, THE VEHICLE INSTEAD ACCELERATED. THE VEHICLE DROVE OVER THE CURBED MEDIAN, OVER SOME LOW HEDGES, AND STRUCK →

130: 01 | 131: 01 | 132: 01 | 133: 01

136 Damage To Other Property

Oper.	137 Charge	☐ Multiple Charges	138 Summons No.	Oper.	139 Charge	☐ Multiple Charges	140 Summons No.

141 Officer's Signature: P.O. Fedus | 142 Badge No.: 128 | 143 Reviewed By: BY | Badge No.: 107 | 144 Case Status: ☐ 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
A	01	01	01	—	66	M	—	—	—	07	04	—	—	DRIVER #01
B	—	—	—	—	—	—	—	—	—	—	—	—	—	
C	—	—	—	—	—	—	—	—	—	—	—	—	—	
D	—	—	—	—	—	—	—	—	—	—	—	—	—	
E	—	—	—	—	—	—	—	—	—	—	—	—	—	

NJTR-1 (R4/10) | Police Copy | 13-0793

Page 02 of 02 | Fatal

New Jersey Police Crash Investigation Report

Reportable | Non-Reportable | Change Report

1 Case Number: B-118

2 Police Dept of: MONTVALE | Code: 01

3 Station/Precinct: WEST

10 Crash Occurred On: 300 W. GRAND AVE (EOT OF) | Road Name | Dir: W

11 Speed Limit:

12 Route No. | Suffix | 13 Milepost

18 Speed Limit: 25

At Intersection with | Feet: 200 | Miles | 14 | 15

N E S W of: MERCEDES DRIVE

16 | 17 Cross Road Name

19 Ramp: To: | From:

20 Route/Name

NB EB SB WB

21 Latitude | 22 Longitude

4 Date of Crash: mm 04 dd 29 yy 13

5 Day of Week: Su M Tu W Th F Sa

6 Time (use 2400 hrs): 1420

7 Municipality Code: 0236

8 Total Killed: -

9 Total Injured: -

Vehicle #03

23 Veh No: 03

24 Policy No.: [redacted]

25 Ins Code: 046

Parked | Ped | Pedalcyclist | Resp to Emergency | Hit & Run

26 Driver's First Name | Initial | Last Name | 29 Sex

27 Number and Street | 30 Eyes

28 City | State | Zip

31 State | 32 Drivers License No | 33 DOB mm dd yy | 34 Expires mm yy

35 Owner's First Name | Initial | Last Name

Same As Driver

36 Number and Street

37 City: MAHWAH | State: NJ | Zip: [redacted]

38 Make: HONDA | 39 Model: CIVIC | 40 Color: GRAY | 41 Year: 2008 | 42 Plate No.: [redacted] | 43 State

44 VIN: 2HGFG11858H[redacted] | 45 Expires: 03/14

46 Vehicle Removed To: Driven | Left at Scene | Towed | Impound | Disabled | 47 Authority: Owner | Driver | Police

DESTINATION

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

134 Crash Diagram (NOT TO SCALE)

Indicate North

SEE PAGE #01

Vehicle #01

53 Veh No | 54 Policy No. | 55 Ins Code

Parked | Ped | Pedalcyclist | Resp to Emergency | Hit & Run

56 Driver's First Name | Initial | Last Name | 59 Sex

57 Number and Street | 60 Eyes

58 City | State | Zip

61 State | 62 Drivers License No | 63 DOB mm dd yy | 64 Expires mm yy

65 Owner's First Name | Initial | Last Name

Same As Driver

66 Number and Street

67 City | State | Zip

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: Owner | Driver | Police

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

135 Crash Description → TWO UNOCCUPIED PARKED VEHICLES, VEHICLE #02 & VEHICLE #03. DRIVER #01 BLAMES THE ACCIDENT ON THE VEHICLE ACCELERATING WHEN THE BREAKS WERE APPLIED. I WAS UNABLE TO DETERMINE IF THERE WAS INFACT A PROBLEM WITH THE VEHICLE'S PEDALS, OR IF THE OPERATOR ACCIDENTALLY STEPPED ON THE ACCELERATOR INSTEAD OF APPLYING THE BREAKS. AS A PRECAUTION VEHICLE #01 WAS TOWED FROM THE SCENE.

136 Damage To Other Property

Oper. | 137 Charge | Multiple Charges | 138 Summons No. | Oper. | 139 Charge | Multiple Charges | 140 Summons No.

141 Officer's Signature: P.O. Feduc | 142 Badge No.: 128 | 143 Reviewed By | Badge No.: 107 | 144 Case Status: 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
A														
B														
C														
D														
E														

NJTR-1 (R4/10)

Police Copy

13-0793

NANUET COLLISION CENTERS, INC.

"The Collision Physicians"
417 RT. 59, MONSEY, NY 10952
Phone: (845) 356-5861
FAX: (845) 356-8417

Workfile ID:	404e0246
Federal ID:	200864078
State ID:	200864078
Resale Number:	200864078
License Number:	7097039

Preliminary Supplement 1 with Summary

Customer: [redacted]

Job Number: 4984

Written By: Kevin Muir, IA-959050

Insured: [redacted]
Policy #: [redacted]
Claim #: [redacted]
Type of Loss: Collision
Date of Loss: 4/29/2013 12:00:00 AM
Days to Repair: 7
Point of Impact: 12 Front

Owner:
[redacted]
MONSEY, NY [redacted]
[redacted]Evening

Inspection Location:
NANUET COLLISION CENTERS, INC.
417 RT. 59
MONSEY, NY 10952
Repair Facility
(845) 356-5861 Business

Insurance Company:
GEICO

VEHICLE

Year:	2007	Body Style:	4D H/B	VIN:	JTDKB20U777[redacted]	Mileage In:	112893
Make:	TOYO	Engine:	4-1.5L-G/E	License:	[redacted]	Mileage Out:	
Model:	PRIUS TOURING	Production Date:	11/2006	State:	NY	Vehicle Out:	
Color:	SILVER / 1F7 Int: GREY	Condition:	Good	Job #:	4984		

TRANSMISSION
Automatic Transmission

POWER
Power Steering
Power Brakes
Power Windows
Power Locks
Power Mirrors
Heated Mirrors

DECOR
Dual Mirrors

CONVENIENCE
Air Conditioning
Rear Defogger
Tilt Wheel
Cruise Control
Keyless Entry
Rear Window Wiper
Steering Wheel Controls
Message Center

RADIO
AM Radio
FM Radio
Stereo
Search/Seek
CD Player

SAFETY
Anti-Lock Brakes (4)
Driver Air Bag
Passenger Air Bag
Head/Curtain Air Bags
Front Side Impact Air Bags

SEATS
Cloth Seats
Bucket Seats

WHEELS
Aluminum/Alloy Wheels

PAINT
Clear Coat Paint

OTHER
Traction Control
Fog Lamps
Xenon Headlamps
Rear Spoiler

Customer: [redacted] **Job Number: 4984**

Vehicle: 2007 TOYO PRIUS TOURING 4D H/B 4-1.5L-G/E SILVER / 1F7

Line		Oper		Description	Part Number	Qty	Extended Price $		Labor	Paint
1	#			SET-UP & MEASURE		1			2.0 F	
2	#	S01		PULL, SQUARE AND ALIGN UNIBODY		1			3.5 F	
3	**FRONT BUMPER**									
4	#			Additional Labor for fog lamps		1			-0.3	
5		S01		O/H bumper assy					2.5	
6		S01	Repl	Bumper cover	5211947903	1	233.50		Incl.	2.8
7		S01		Add for Clear Coat						1.1
8		S01		Add for fog lamps					0.3	
9		S01	Repl	Prep unprimed bumper		1				0.7
10		S01	Repl	RT Side support	5211547010	1	33.82		Incl.	
11		S01	Repl	License bracket	5211447040	1	43.18		0.2	
12		S01	R&I	Reinf beam					Incl.	
13			R&I	Molding chrome					Incl.	
14		S01	Repl	Spoiler	7685147010	1	73.30		Incl.	
15	**		Repl	A/M Bumper cover fastener		5	4.00		Incl.	
				NOTE: AUVECO - (800) 354-9816						
16	**GRILLE**									
17		S01	Repl	Grille center	5311147010	1	59.84		Incl.	
18		S01	Repl	RT Grille outer w/fog lamps	5311247030	1	22.85		Incl.	
19	**AIR CONDITIONER & HEATER**									
20			R&I	Condenser				m	1.1	
21			Repl	Refrigerant recovery		1		m	0.4	
22			Repl	Evacuate & recharge		1		m	1.4	
23	#	S01	Repl	Freon		1	12.93			
				NOTE: TOP OFF						
24	**COOLING**									
25			R&I	Radiator assy				m	3.2	
26				Deduct for Overlap					-0.5	
27	**FRONT LAMPS**									
28			R&I	RT R&I headlamp assy					0.3	
29			Repl	RT Fog lamp bulb	9098113047	1	22.04		0.1	
30	#	S01	Repl	RT Fog lamp pigtail		1	10.68		0.5	
31	#		Rpr	Wiring					1.0	
32	**ENGINE / TRANSAXLE**									
33		S01	Repl	Resonator	1789321030	1	63.27	m	0.3	
34	**RADIATOR SUPPORT**									
35	*	S01	Rpr	Lower tie bar				s	3.5	0.5
				NOTE: AFTER PULL - PARTIAL REFINISH						
36				Add for Clear Coat						0.1
37	**FENDER**									
38		S01	Repl	RT Fender liner	5387547020	1	105.45		0.3	
39	**MISCELLANEOUS OPERATIONS**									

Customer: [redacted] **Job Number: 4984**

Vehicle: 2007 TOYO PRIUS TOURING 4D H/B 4-1.5L-G/E SILVER / 1F7

40	*	S01	Repl	Cover car/bag	1	6.00	0.0	0.2
41	#			Color Match	1		0.3	
42	#			D & R battery	1		0.1	
43	#			Flex Additive	1	10.00		
44	#		Rpr	PRE-FIT A/M SHEET METAL			1.0	
				NOTE: NECESSARY BEFORE PARTS PREP / EDGE / ADJ TO SECURE A/P WITH KEVIN				
45	#		Rpr	Clamp damage			0.5	0.5
46	#			Corrosion protection	1	10.00 T	0.2	
47	#		Repl	Rustproof	1	10.00	0.2	
				NOTE: NECESSARY FOR BACKSIDE OF REPAIRED PANELS.				
48	#		Repl	Reset electronics	1		0.1	
49	#		Repl	Color sand & polish	1		0.5	
50	#	S01		P & M ADJUSTMENT	1	85.38		
51	#			LABOR ADJUSTMENT	1	50.80		
52				OTHER CHARGES				
53	#			E.P.C.	1	2.50		
				SUBTOTALS		**859.54**	**22.7**	**5.9**

NOTES

Estimate Notes:
ALL R & I OPERATIONS ARE TO SECURE A/P W/ KEVIN. ALL REPAIR TIMES INCLUDE FEAHTEREDGE AND PRIME
3 VENDOR RULE APPLIES

Prior Damage Notes:
RT FENDER - CHIP, RUSTED .5
HOOD .5
L/F DOOR .5
L/R DOOR .5
RT COVER .5
R/F DOOR 1.0

Customer: [redacted]

Job Number: 4984

Vehicle: 2007 TOYO PRIUS TOURING 4D H/B 4-1.5L-G/E SILVER / 1F7

ESTIMATE TOTALS

Category	Basis		Rate	Cost $
Parts				847.04
Body Labor	17.2 hrs	@	$ 44.00 /hr	756.80
Paint Labor	5.9 hrs	@	$ 44.00 /hr	259.60
Frame Labor	5.5 hrs	@	$ 44.00 /hr	242.00
Paint Supplies	5.9 hrs	@	$ 24.00 /hr	141.60
Miscellaneous				10.00
Other Charges				2.50
Subtotal				2,259.54
Sales Tax	$ 2,259.54	@	8.3750 %	189.24
Grand Total				**2,448.78**
Deductible				500.00
CUSTOMER PAY				**500.00**
INSURANCE PAY				**1,948.78**

[redacted]

Monsey, NY

[redacted]

US Department of Transportation
NATIONAL Highway Traffic Safety Administ
Office of Defects Investigation, NVS-2
1200 New Jersey Avenue SE.
Washington, D.C., ~~20077-9382~~
20590