


INFORMATION Redacted PURSUANT TO THE FREEDOM OF

 <p>U.S. Department of Transportation National Highway Traffic Safety Administration</p>		<p>INFORMATION ACT (FOIA), 5 U.S.C. 552(B)(6) DOT Auto Safety Hotline</p> <p><b>Vehicle Owner's Questionnaire</b> To Report Vehicle Safety Defects 1-888-DASH-2-DOT (1-888-327-4236) INTERNET:www.nhtsa.dot.gov/hotline</p>		<p>FOR AGENCY USE ONLY 100148</p> <p>Date Received <b>AUG 19 2013</b></p> <p>07-JUN-2013</p>		<p>Repository <input type="checkbox"/></p> <p>Reference No. 10515611</p>	
<p><b>OWNER INFORMATION (Type or Print)</b></p>							
Name		Address		City		State	
[REDACTED]		[REDACTED]		BATAVIA		NY	
Zip Code		Daytime Telephone Number		Evening Telephone Number		E-mail Address	
[REDACTED]		[REDACTED]		[REDACTED]		[REDACTED]	
<p>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).</p>							
<p><b>VEHICLE INFORMATION</b></p>							
17 digit Vehicle Identification Number Located at bottom of windshield on driver's side				Make		Model	Model Year
5TENM92NO1Z [REDACTED]				TOYOTA		JALOMA PICKUP	2001
Date Purchased		Dealer's Name and Telephone Number		Engine:		Fuel Type:	
27MAR12		Albion 589-589-7056		No: Cylinders		3RZ-FE	
Original Owner		Dealer's City		State		Zip Code	
<input type="checkbox"/>		[REDACTED]		[REDACTED]		[REDACTED]	
Transmission Type		<input checked="" type="checkbox"/> Antilock Brakes		Powertrain		Multiple Failure:	
		<input type="checkbox"/> Cruise Control				Incident Date(s) 30-DEC-2011	
<p><b>FAILED COMPONENT(S)/PART(S) INFORMATION</b></p>							
Vehicle Component Code: 162000 STRUCTURE: BODY						Failure Mileage	Failure Speed
						95000	
<p><b>ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A TIRE FAILURE</b></p>							
Tire Make		Tire Model (Name or Number)			Tire Size (Example P215/65R15)		
DOT No. (Example: DOTM19ABC036)		<input type="checkbox"/> Original Equipment <input type="checkbox"/> Prior Repair		Failure Location:			
Tire Component Code				Tire Failure Type:			
<p><b>ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A CHILD SEAT FAILURE</b></p>							
Make:		Date Manufactured:		Model No./Name:			
Seat Type:		Installation System:					
Child Seat Component Code:		Failed Part:					
<p><b>APPLICABLE INCIDENT INFORMATION</b> (Please describe in detail the incident(s), Failure(s), Crash(es), and injury(ies).)</p>							
Crash <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Fire <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Number of Persons Injured		Number of Deaths	Reported to Police
				0		0	N
<p>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).</p>							
<p>TL* THE CONTACT OWNS A 2001 TOYOTA PICKUP TRUCK. THE CONTACT STATED THE VEHICLE WAS TAKEN TO AN AUTHORIZED DEALER FOR INSPECTION AND THEY ADVISED HIM THERE WAS A HOLE IN THE FRAME. THE VEHICLE WAS NOT REPAIRED. THE MANUFACTURER WAS NOT NOTIFIED OF THE DEFECT. THE APPROXIMATE FAILURE MILEAGE WAS 95,000. THE VIN WAS UNAVAILABLE.</p>							
<p>Include, if available: Police/Fire Department Report, Photos, and Repair Invoice.</p>				<p>ATTACH ADDITIONAL SHEETS IF NECESSARY</p>			
<p>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.</p>							

CUSTOMER #: 5853440813

88395



\*INVOICE\*

PAGE 1

36 Main Street • Attica, New York 14011  
(716) 591-2300 1-800-593-2300

BATAVIA, NY

HOME:

CONT:N/A

BUS:

CELL:

SERVICE ADVISOR: 25 JUSTIN DUNN

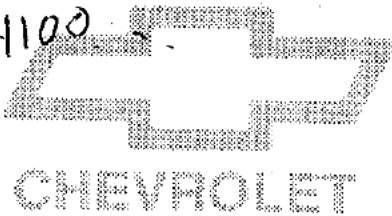
COLOR	YEAR	MAKE/MODEL	VIN	LICENSE	MILEAGE IN/OUT	TAG	
WHITE	01	TOYOTA TACOMA	5TENM92N017		95393/95393		
DEL DATE	PROD. DATE	WARR. EXP	PROMISED	PO NO.	RATE	PAYMENT	INV. DATE
01JAN01 DD		01JAN2004	17:00 26MAR12		87.50	CASH	27MAR12
R.O. OPENED	READY	OPTIONS:	DLR:13328 ENG:3RZ-FE				
26MAR12	27MAR12						

LINE OPCODE TECH TYPE HOURS LIST NET TOTAL  
 A PERFORM MULTI-POINT CHECK OUT REPORT CARD  
 CAUSE: COMPLETE VEHICLE CHECK OVER  
 99P TECH DID NOT FIND ANYTHING WRONG WITH TRUCK  
 AT THIS TIME  
 77 BALON, AARON M LIC#: 6BJ6  
 CPC 0.00 0.00

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DEAR VALUED CUSTOMER  
 YOU MAY RECIEVE A SURVEY FROM GENERAL MOTORS  
 THIS IS OUR REPORT CARD. IF FOR SOME REASON  
 YOU ARE UNABLE TO MARK COMPLETELY SATISFIED  
 PLEASE CALL US AT 585-591-2300 AND ASK FOR  
 TOM COCKMAN, SERVICE MANAGER. I WILL BE  
 HAPPY TO ASSIST YOU.

Jim Robel  
 333 4100



*CIV Recall*  
*✓ For crossed open tire.*  
*Rust proof Decal 3-2012*

Service and Parts Hours  
 Mon., Wed. Thurs. & Fri. 7:30 AM - 5:00 PM  
 Tuesday 7:30 AM - 8:00 PM

N.Y.S. REPAIR SHOP  
 NO. 7088753

The Factory Warranty Constitutes All Of The Warranties With Respect To The Sale Of This Item/Items. The Seller Hereby Expressly Disclaims All Warranties, Either Express Or Implied, Including Any Implied Warranty Of Merchantability Or Fitness For A Particular Purpose, And The Seller Neither Assumes Nor Authorizes Any Other Person To Assume For It Any Liability In Connection With The Sale Of This Item/Items.

TERMS: STRICTLY CASH UNLESS ARRANGEMENTS MADE  
 I hereby authorize the repair work hereinafter set forth to be done along with the necessary material and agree that you are not responsible for loss or damage to vehicle or articles left in vehicle in case of fire, theft or any other cause beyond your control or for any delays caused by unavailability of parts or delays in parts shipments by the supplier or transporter. I hereby grant you and/or your employees permission to operate the vehicle herein described on streets, highways or elsewhere for the purpose of testing and/or transport. An express mechanic's lien is hereby acknowledged on above vehicle to secure the amount of repairs thereto.

X

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 DISCOUNT	0.00
SALES TAX	0.00
PLEASE PAY THIS AMOUNT	0.00



Thank You! We Make The Difference

CUSTOMER COPY

ABSTRACT OF TITLE RECORD

Document # ATWEB019

PRINT DATE: 04/27/2012 TIME: 11:36:42 OPERATOR: WEB OFFICE: DAB

VIN#: 5TENM92N012  
01 TOYOT WHITE PICK WGT: 003082  
FUEL: GAS CYL: 04

CURRENT OWNER

PLATE: TYPE: COMMERCIAL  
BATCH DATE: 03/12/12  
ORIG DOC ISSUED: 04/02/12

BATAVIA NY  
LAST DOC ISSUED: 04/02/12

\*\*\*\*\* PRIOR OWNERS \*\*\*\*\*

PLATE: TYPE: PASSENGER  
BROCKPORT NY  
BATCH DATE: 11/27/07  
ORIG DOC ISSUED: 02/05/08  
ODOMETER: ACTUAL

064977

\*\*\* END OF RECORD \*\*\*

EXCELSIOR

This is to certify that this document is a true and complete copy of an electronic record on file in the New York State Department of Motor Vehicles, Albany, New York. The record was made in regular course of New York State Department of Motor Vehicles daily business. It is the business of the New York State Department of Motor Vehicles to create and maintain the records of drivers in the state of New York. Entries in this document are made at the time the recorded transactions or events took place or within a reasonable time thereafter. The person who reports the information is under a business duty to do so accurately.

*Barbara J. Liala*

COMMISSIONER OF MOTOR VEHICLES