



U.S. Department of Transportation
National Highway Traffic Safety Administration

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

Vehicle Owner's Questionnaire
To Report Vehicle Safety Defects
1-888-DASH-2-DOT
(1-888-327-4236)
INTERNET: www.nhtsa.dot.gov/hotline

AGENCY USE ONLY 100148

Date Received NOV 15 2013 22-OCT-2013	Repository <input type="checkbox"/>
	Reference No. 10548965

OWNER INFORMATION (Type or Print)			
Name	[REDACTED]		
Address	[REDACTED]		
City	State	Zip Code	
GLEN-LYON	PA	[REDACTED]	
Daytime Telephone Number	[REDACTED]		
Evening Telephone Number	SAME		

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 2T1BR32E080 [REDACTED]				Make TOYOTA	Model COROLLA	Model Year 2008
Date Purchased OCT-2007	Dealer's Name and Telephone Number INDEPENDENCE TOYOTA		Engine: No: Cylinders 4	Fuel Type: REG GAS		
Original Owner <input type="checkbox"/>	Dealer's City HAZLETON-PA INDEPENDENCE 730 AIRPORT PA	State PA	Zip Code 18202			
Transmission Type AUTOM.	<input type="checkbox"/> Antilock Brakes <input type="checkbox"/> Cruise Control	Powertrain	Multiple Failure:	Incident Date(s) FROM 20-OCT-2010 2011		

FAILED COMPONENT(S)/PART(S) INFORMATION

Vehicle Component Code: LIGHTING (PWS) "NIGHT TIME HAZARD" FOR SEEING	Failure Mileage 35000	Failure Speed ALL SPEEDS
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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: DOTM9ABC036)	<input type="checkbox"/> Original Equipment <input type="checkbox"/> 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 <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Fire <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Number of Persons Injured 0	Number of Deaths 0	Reported to Police N
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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 2008 TOYOTA COROLLA. THE CONTACT STATED THAT THE HEADLIGHT LENSES BECAME FOGGY AND THE ILLUMINATION WAS LOWER THAN NORMAL. THE VEHICLE WAS NOT TAKEN TO THE DEALER. THE MANUFACTURER WAS MADE AWARE OF THE FAILURE. THE VEHICLE WAS NOT REPAIRED. THE VIN WAS NOT AVAILABLE. THE FAILURE MILEAGE WAS 35,000 AND THE CURRENT MILEAGE WAS 65,000.

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 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.