

 <p><b>DOT Auto Safety Hotline</b>  <b>Vehicle Owner's Questionnaire</b>  <b>To Report Vehicle Safety Defects</b>  <b>1-888-DASH-2-DOT</b>  <b>(1-888-327-4236)</b>  <b>INTERNET:www.nhtsa.dot.gov/hotline</b></p>		FOR AGENCY USE ONLY 100148	
		Date Received 07-AUG-2014 SEP 12 2014	Repository <input type="checkbox"/> Reference No. 10619565
<b>OWNER INFORMATION (Type or Print)</b>			
Name		Daytime Telephone Number	
Address		E-mail Address NOEMAIL@UNK.GOV	
City MADAWASKA	State ME	Zip Code	
<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>			
<b>VEHICLE INFORMATION</b>			
17 digit Vehicle Identification Number Located at bottom of windshield on driver's side JTEES41A482		Make TOYOTA	Model Year 2008
Date Purchased 9/25/07	Dealer's Name and Telephone Number DOWN EAST TOYOTA 207-989-6400		Engine: No: Cylinders 6
Original Owner <input checked="" type="checkbox"/>	Dealer's City BREWSTER, MAINE	State ME	Fuel Type: REGULAR
Zip Code 04412	Transmission Type <input checked="" type="checkbox"/> Antilock Brakes <input checked="" type="checkbox"/> Cruise Control		Incident Date(s) 23-JUL-2014
<b>FAILED COMPONENT(S)/PART(S) INFORMATION</b>			
Vehicle Component Code: 140000 AIR BAGS SRS WARNING LIGHT		Failure Mileage 64000	Failure Speed 4
<b>ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A TIRE FAILURE</b>			
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:		
<b>ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A CHILD SEAT FAILURE</b>			
Make:	Date Manufactured:	Model No./Name:	
Seat Type:	Installation System:		
Child Seat Component Code:	Failed Part:		
<b>APPLICABLE INCIDENT INFORMATION</b> (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	
<p><b>Narrative Description of Incident(S), Crash(es), and Injury(ies).</b>  <b>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).</b></p> <p>TL* THE CONTACT OWNS A 2008 TOYOTA HIGHLANDER. WHILE DRIVING APPROXIMATELY 4 MPH, THE SRS WARNING SENSOR ILLUMINATED CONTINUOUSLY. THE DEALER STATED THAT THE SPIRAL CABLE NEEDED TO BE REPLACED. THE VEHICLE WAS NOT REPAIRED. THE CONTACT RECEIVED A RECALL NOTICE FOR NHTSA CAMPAIGN NUMBER: 14V168000 (AIR BAGS); HOWEVER, THE PART NEEDED FOR THE REPAIR WAS UNAVAILABLE. THE MANUFACTURER WAS NOTIFIED. THE APPROXIMATE FAILURE MILEAGE WAS 64,000.</p>			
Include, if available: Police/Fire Department Report, Photos, and Repair Invoice.		ATTACH ADDITIONAL SHEETS IF NECESSARY	
<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>			