

APR - 3 2015

 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 03-FEB-2015	Repository ☐ Reference No. 10680860		
OWNER INFORMATION (Type or Print)				Daytime Telephone Number	
Name				E-mail Address	
Address				Evening Telephone Number	
City ONTARIO		State CA	Zip Code		
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 4T1B F 2 9 B 02 U		Make TOYOTA	Model AVALON XL	Model Year 2002	
Date Purchased 10/03/02	Dealer's Name and Telephone Number MORENO VALDES TOYOTA 909-247-8000		Engine: No: Cylinders	Fuel Type: REGULAR	
Original Owner ☒	Dealer's City 27990 EUCALYPTUS	State CA	Zip Code 92555	1M2 PE TRN AUTO	
Transmission Type AUTO	☐ Antilock Brakes ☐ Cruise Control	Powertrain	Multiple Failure:	Incident Date(s) 29-JAN-2015	
FAILED COMPONENT(S)/PART(S) INFORMATION					
Vehicle Component Code: 140000 AIR BAGS				Failure Mileage 70000	Failure Speed
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 2002 TOYOTA AVALON. THE CONTACT STATED THAT WHILE DRIVING AT VARIOUS SPEEDS, THE AIR BAG LIGHT ILLUMINATED CONTINUOUSLY. THE FAILURE RECURRED NUMEROUS TIMES. THE VEHICLE WAS TAKEN TO A DEALER, WHERE IT WAS DIAGNOSED THAT THE AIR BAG SYSTEM NEEDED TO BE REPLACED. THE VEHICLE WAS REPAIRED BUT THE FAILURE RECURRED. THE MANUFACTURER WAS NOT MADE AWARE OF THE FAILURE. THE FAILURE MILEAGE WAS APPROXIMATELY 70,000. THE VIN WAS NOT AVAILABLE.					
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.					