

- Step 1: Complete this form.
- Step 2: Click [here](#) to save the form to your computer.
- Step 3: Click [here](#) to access the upload web page.

Temporary Complaint Number (TCN): EFN5-50506

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INFORMATION Redacted PURSUANT TO THE FREEDOM OF

Required Information in **Bold**

Form Approved: OMB No. 2127-0008; Expires 05/31/2018

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

## Vehicle Information

EG-10723,107-

Vehicle Identification Number (VIN) (See Instructions on the next page to locate the VIN.)

4	T	1	B	K	1	E	B	0	E	U						
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17

JUN 15 2015

Select/Enter Make

TOYOTA

Enter Model

AVALON LIMITED

Select/Enter Year

2014

## Incident Information

Approximate Incident Date

06/03/2015

For multiple incident dates enter the first date of occurrence.

(mm/dd/yyyy)

Failure Mileage

4,300

miles

For multiple incidents enter the first failure mileage.

Speed (at time of incident)

50

mph

Was there a Crash?

Yes  No

Was there a Fire?

Yes  No

Number of Deaths, if any

Number of Persons Injured, if any

Was medical attention required?

Yes  No

Description (up to 1900 characters)

1699 characters remaining

**WARNING:** This description, exactly as you enter it, may appear in a public NHTSA database.

**Do not include any personal information** (name, street/email address, phone number, social security/driver license number, Vehicle Identification Number (VIN), etc...).

Post collision system (with auto-brake) activated (including seat belt tightening) with a CLEAR road ahead. This could be a major disaster if it happened ahead of a tractor trailer at interstate speeds.

If your component is not listed below, please describe the component in the above description field.

Failed Component 1

Speed Control

Failed Component 2

Speed Control

Failed Component 3

Select the Component

## Personal Information

First Name

[Redacted]

Last Name

[Redacted]

Email

[Redacted]

(provided earlier and locked for your security)

Daytime Phone

[Redacted]

Evening Phone

cell [Redacted]

Address 1

[Redacted]

Address 2

City

Alexandria

State

VIRGINIA

Zip Code

[Redacted]

PRECOLLISION SYSTEM  
AUTO BRAKE

New Reply Delete Archive Junk Swai

Search email

Folders

- Inbox 22
- Junk 15
- Drafts 1
- Sent
- Deleted
- accident II
- Amazon
- Amerman
- Ask Leo
- Avalon
- Bo Polny
- Callawasse
- Canada
- Casper
- Burdick
- Chrashmas
- Dataw Island
- DENT
- dilorinzo
- DOD
- dynamic Trader
- ESCORT
- Flannigan
- Generator
- Greedometer
- Hearing aid

# Acknowledgement from NHTSA/ODI of your safety complaint



US DOT NHTSA (donotreplyodi@dc

To: [Redacted]

Thank you for filing your safety-related complaint via our Web site or our Vehicle Safety Hotline. The ODI Number listed below will be a direct link to your complaint as soon as it is ready to view. Please allow at least two business days for approval and processing before trying to view your complaint online. You will then be able to view it and search any associated documents.

Your Confirmation number (ODI Number) is: **10723107**

Your complaint information will be entered into the NHTSA vehicle owner complaint database. NHTSA technical staff review this information to identify potential safety problems. While you may or may not be contacted by a NHTSA investigator to clarify the information submitted, all reports are reviewed and analyzed for potential defects trends. Also, the NHTSA complaint database provides valuable information to other consumers and to manufacturers.

If you have any questions regarding this complaint, please contact ODI:

- By phone: 1-888-327-4236 Monday-Friday, 8:00AM to 8:00PM Eastern  
TTY: 1-888-424-9153  
Have your ODI Number available.  
(Spanish-speaking operators available)
- By e-mail: <http://www-odi.nhtsa.dot.gov/contact.cfm>  
Indicate your ODI Number in the contact form.

Thank you,

Office of Defects Investigation (ODI)  
National Highway Traffic Safety Administration (NHTSA)  
U.S. Department of Transportation (DOT)

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Ref  
804.  
272  
NHTSA  
PRECISION

[REDACTED]  
ALEXANDRIA, VIRGINIA  
[REDACTED] C [REDACTED] FAX [REDACTED]  
[REDACTED]

COULD NOT FILE  
ELECTRONICALLY -

PLS FILE

[REDACTED]

Alexandria, VA

IND 2015 2015

08 JUN 2015 11:51



JUN 12 2015

Office of Detectives Investigation / CRO  
NIS - 216  
1200 NEW JERSEY AVE SE  
WASH DC 20590

20590

