


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

 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: 21-JUL-2015 SER 22-2015		Repository <input type="checkbox"/> Reference No. 10735400
OWNER INFORMATION (Type or Print)						
Name		Address		Daytime Telephone Number	E-mail Address	
City		State	Zip Code	Evening Telephone Number		
CUSSETA		AL				
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		Make	Model	Model Year		
5TBR34145S		TOYOTA	TUNDRA	2005		
Date Purchased	Dealer's Name and Telephone Number		Engine:	Fuel Type:		
12-2004	LAGRANGE TOYOTA		No: Cylinders	GAS		
Original Owner <input type="checkbox"/>	Dealer's City	State	Zip Code			
Transmission Type	<input checked="" type="checkbox"/> Antilock Brakes	Powertrain	Multiple Failure:	Incident Date(s)		
AUTO	<input checked="" type="checkbox"/> Cruise Control		NONE	20-JUL-2015		
FAILED COMPONENT(S)/PART(S) INFORMATION						
Vehicle Component Code: 140000 AIR BAGS			Failure Mileage	Failure Speed		
			NONE	NONE		
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		
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 2005 TOYOTA TUNDRA. THE CONTACT STATED THAT THE NOTICE FOR NHTSA CAMPAIGN NUMBER: 15V286000 (AIR BAGS) WAS RECEIVED IN JULY OF 2015. AFTER CONTACTING THE DEALER AND THE MANUFACTURER, THE CONTACT WAS INFORMED THAT THE PARTS NEEDED TO REPAIR THE VEHICLE WERE NOT AVAILABLE AND NO ESTIMATED TIME FOR RECEIVING THE PARTS COULD BE GIVEN. THE CONTACT HAD NOT EXPERIENCED A FAILURE.						
AIR BAG HAS BEEN REPAIRED. 7-2015.						
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.						