


INFORMATION Redacted PURSUANT TO THE FREEDOM OF
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 19-AUG-2015 SEP 22 2015		Repository <input type="checkbox"/> Reference No. 10749827
OWNER INFORMATION (Type or Print)						
Name		Address		City		State
[REDACTED]		[REDACTED]		LEXINGTON		State KY
Zip Code		Daytime Telephone Number		E-mail Address		Evening Telephone Number
[REDACTED]		[REDACTED]		[REDACTED]		[REDACTED]
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	
1NXBR32EX6Z [REDACTED]			TOYOTA	COROLLA	2006	
Date Purchased	Dealer's Name and Telephone Number			Engine:	Fuel Type:	
				No: Cylinders	4 Regular	
Original Owner	Dealer's City		State	Zip Code		
<input checked="" type="checkbox"/>	Lexington		KY	40509		
Transmission Type	<input checked="" type="checkbox"/> Antilock Brakes	Powertrain	Multiple Failure:		Incident Date(s)	
	<input type="checkbox"/> Cruise Control				19-MAY-2015	
FAILED COMPONENT(S)/PART(S) INFORMATION						
Vehicle Component Code: 140000 AIR BAGS				Failure Mileage	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)		<input type="checkbox"/> Original Equipment	Failure Location:			
		<input type="checkbox"/> Prior Repair				
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	Fire	Number of Persons Injured	Number of Deaths	Reported to Police		
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	0	0	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 2006 TOYOTA COROLLA. THE CONTACT RECEIVED NOTIFICATION OF NHTSA CAMPAIGN NUMBER: 15V286000 (AIR BAGS); HOWEVER, THE PART NEEDED TO DO THE REPAIR WAS UNAVAILABLE. THE CONTACT STATED THAT THE MANUFACTURER EXCEEDED A REASONABLE AMOUNT OF TIME FOR THE RECALL REPAIR. THE MANUFACTURER WAS NOT MADE AWARE OF THE ISSUE. THE CONTACT HAD NOT EXPERIENCED A FAILURE.						
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.						