

INFORMATION Redacted PURSUANT TO THE FREEDOM OF

INFORMATION ACT (FOIA), 5 U.S.C. 552(B)(6)  
 DOT Auto Safety Hotline

FOR AGENCY USE ONLY 100148



U.S. Department of Transportation  
 National Highway Traffic Safety Administration

**Vehicle Owner's Questionnaire**  
 To Report Vehicle Safety Defects  
 1-888-DASH-2-DOT  
 (1-888-327-4236)  
 INTERNET: www.nhtsa.dot.gov/hotline

Date Received	Repository <input type="checkbox"/>
09-MAR-2016 APR 29 2016	Reference No. 10845742

**OWNER INFORMATION (Type or Print)**

Name			Daytime Telephone Number		E-mail Address
Address			Evening Telephone Number		
City	State	Zip Code			
WOODBURY	NY				

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 2T1BR32EX6C		Make TOYOTA	Model COROLLA	Model Year 2006
Date Purchased 2006	Dealer's Name and Telephone Number		Engine: No: Cylinders	Fuel Type:
Original Owner <input checked="" type="checkbox"/>	Dealer's City	State	Zip Code	
Transmission Type	<input type="checkbox"/> Antilock Brakes	Powertrain	Multiple Failure:	Incident Date(s) 10-FEB-2015
	<input type="checkbox"/> Cruise Control			

**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 <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	Number of Deaths	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\* TAKATA RECALL. THE CONTACT OWNS A 2006 TOYOTA COROLLA. THE CONTACT RECEIVED NOTIFICATION OF NHTSA CAMPAIGN NUMBER: 15V285000 (AIR BAGS); HOWEVER, THE PART NEEDED TO PERFORM THE REPAIR WAS UNAVAILABLE. THE CONTACT STATED THAT THE MANUFACTURER EXCEEDED A REASONABLE AMOUNT OF TIME FOR THE RECALL REPAIR. THE MANUFACTURER WAS NOTIFIED OF THE ISSUE. THE CONTACT HAD NOT EXPERIENCED A FAILURE. VIN TOOL CONFIRMS PARTS NOT AVAILABLE.

I DID FINALLY GET AN APPOINTMENT WITH TOYOTA  
 for JUNE 6, 2016 to REPLACE THE AIR BAGS.

THANKS FOR YOUR HELP.

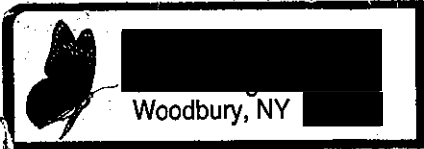
Include, if available: Police/Fire Department Report, Photos, and Repair Invoice. ATTACH ADDITIONAL SHEETS IF NECESSARY

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.

Description of Incident(s), Failure(s), Crash(es), and Injury(ies)

Horizontal lines for incident description.

ATTACH ADDITIONAL SHEETS IF NECESSARY



MID-ISLAND  
NY 117  
22 APR '16  
PL 131

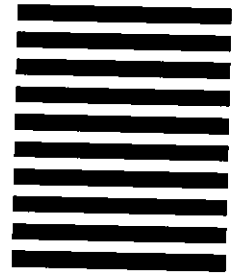


NO POSTAGE  
NECESSARY  
IF MAILED  
IN THE  
UNITED STATES

Washington, D.C. 20077-9382  
Official Business  
Penalty for Private Use \$300

**BUSINESS REPLY MAIL**  
FIRST CLASS MAIL PERMIT NO. 1888 WASHINGTON, DC

POSTAGE WILL BE PAID BY ADDRESSEE



**US Department of Transportation  
National Highway Traffic Safety Administration  
Office of Defects Investigation, NEF-100  
1200 New Jersey Avenue SE.  
Washington, D.C. 20077-9382**



**Think your vehicle  
has a safety defect?**



**If so:  
Use the enclosed  
form to file a report.**

**or visit:  
www.safercar.gov**

**or call:  
Vehicle Safety Hotline  
888-327-4236**



Vehicle Owners' Questionnaire (VOQ)  
U.S. Department of Transportation  
National Highway Traffic Safety Administration