



U.S. Department
of Transportation

National Highway
Traffic Safety
Administration

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

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-2016

OCT - 7 2016

Repository ☐

Reference No.
10897057

Daytime Telephone Number

E-mail Address

Evening Telephone Number

OWNER INFORMATION (Type or Print)

Name

Address

City

PALOS VERDES PENINSULA

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

JTHBP262885

Make

LEXUS

Model

IS F

Model Year

2008

Date Purchased

Dealer's Name and Telephone Number

Engine:

No: Cylinders

Fuel Type:

Original Owner

☐

Dealer's City

State

CA

Zip Code

8

GAS

Transmission Type

AUTO

☒ Antilock Brakes

☒ Cruise Control

Powertrain

Multiple Failure:

Incident Date(s)

01-AUG-2015

FAILED COMPONENT(S)/PART(S) INFORMATION

Vehicle Component Code: 140000 AIR BAGS

Failure Mileage

52000

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 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* THE CONTACT OWNS A 2008 LEXUS IS F. THE CONTACT STATES THAT THE AIR BAG WARNING LIGHT ILLUMINATED. THE CONTACT ALSO STATED THAT THE RECALL NOTICE FOR NHTSA CAMPAIGN NUMBER: 16V340000 (AIR BAGS) WAS RECEIVED IN MAY 2016. AFTER CONTACTING THE DEALER ON MULTIPLE OCCASIONS, THE CONTACT WAS INFORMED THAT THE PARTS NEEDED TO REPAIR THE VEHICLE WERE STILL NOT AVAILABLE AND NO ESTIMATED TIME FOR RECEIVING THE PARTS COULD BE GIVEN. THE FAILURE MILEAGE WAS 52,000.

PARTS NOT AVAILABLE UNTIL JAN. 2017

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.