



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

AGENCY USE ONLY 100148

Date Received 19-AUG-2016	Repository <input type="checkbox"/>
	Reference No. 10897229

OWNER INFORMATION (Type or Print)

Name: [Redacted]
Address: [Redacted]
City: MIAMI SHORE State: FL Zip Code: [Redacted]

Daytime Telephone Number: [Redacted] E-mail Address: [Redacted]
Evening Telephone Number: [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 JTTEW41A582 [Redacted]	Make TOYOTA	Model HIGHLANDER	Model Year 2008
Date Purchased 2008	Dealer's Name and Telephone Number Expanding Toyota <i>Headquarter Toyota 305/364-9800</i>		Engine: No: Cylinders
Original Owner <input type="checkbox"/>	Dealer's City <i>Miami, Fla.</i>	State <i>Fl</i>	Zip Code <i>33133</i>
Transmission Type	<input checked="" type="checkbox"/> Antilock Brakes <input checked="" type="checkbox"/> Cruise Control	Powertrain	Multiple Failure: <i>Warning light before small fail.</i>
		Incident Date(s) 30-JUL-2016	Fuel Type: <i>Reg.</i>

FAILED COMPONENT(S)/PART(S) INFORMATION

Vehicle Component Code: 030000 BRAKES (PWS)	Failure Mileage 75000 <i>70,000</i>	Failure Speed <i>50 mph</i>
---	--	--------------------------------

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* THE CONTACT OWNS A 2008 TOYOTA HIGHLANDER. THE CONTACT STATED THAT THE BRAKE WARNING INDICATOR ILLUMINATED. THE CONTACT TOOK THE VEHICLE TO THE DEALER WHERE IT WAS DIAGNOSED THAT THE ACCUMULATOR AND ACTIVATOR FAILED AND NEEDED TO BE REPLACED. THE VEHICLE WAS NOT REPAIRED. THE FAILURE RECORDED. THE MANUFACTURER STATED THAT THE REPAIR WAS NOT COVERED BY WARRANTY OR RECALL. THE APPROXIMATE FAILURE MILEAGE WAS 75,000. *70,000.*

I paid \$3,331.56 for the repair. This same part/parts malfunctioned in the Toyota (Hybrid) + a class action lawsuit covered year 2008 the repair expenses in that case.

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.

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

Fortunately I had no crash - and took my car to No. Miami Toyota (Fla.) where they gave me an estimate of 4900.00 to repair the accumulator + ~~actuator~~ ACTUATOR. I drove carefully home & got a second estimate from Headquarter Toyota (enclosed bill) for \$3331.56 for the same repair. A class action suit would seem appropriate here as the Camry Hybrid 2008 had the same problem that resolved in reimbursement of all those cars affected.

ATTACH ADDITIONAL SHEETS IF NECESSARY

U.S. Department of Transportation

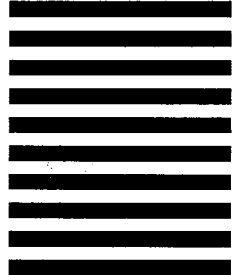
National Highway Traffic Safety Administration

1260 New Jersey Avenue SE, Washington, D.C. 20077-9382

Official Business Penalty for Private Use \$300



NO POSTAGE NECESSARY IF MAILED IN THE UNITED STATES



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.safecar.gov

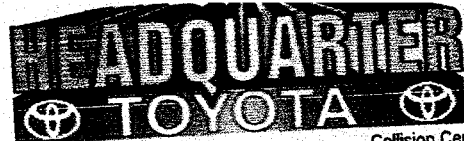
or call:
Vehicle Safety Hotline
888-327-4236



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

TOMER #:

INVOICE



Service, Parts
5895 N.W. 167th Street

Collision Center
5825 N.W. 167th Street

Miami, Florida 33015
Telephone: (305) 364-9800
www.headquartertoyota.com

PAGE 3

Service: MV-4218 MVR-00173 Body Shop: MV-62804 MVR-10098

AMI, FL
ME:
S:

CONT
CELL

SERVICE ADVISOR: 389 EDDY SUAREZ

COLOR	YEAR	MAKE/MODEL	VIN	LICENSE	MILEAGE IN / OUT	TAG		
	08	TOYOTA HIGHLANDER	JTEEW41A582		70532/70533	TE729		
UE	DEL. DATE	PROD. DATE	WARR. EXP.	PROMISED	PO. NO.	RATE	PAYMENT	INV. DATE
	DEC07 IS			19:30 10SEP16	-	0.00	CHECK	14SEP16
	DEC07 DD							
R.O. OPENED	READY	OPTIONS:	STK:	DLR:				
7:20 07SEP16	08:42 14SEP16							
LINE	OPCODE	TECH	TYPE	HOURS	LIST	NET	TOTAL	

A representative from Headquarter Toyota may contact you to follow up on your visit. Our team wants to make sure that your visit has exceeded your expectations. If you have any questions or comments, please call customer service specialists at 305-423-2635 thank you
FL MTR VEH REG #

PAID

SEP 14 2016

AMEX VISA M/C
CK#

MC

3331.56

WARRANTY DISCLAIMER: ALL PARTS AND ACCESSORIES ARE SOLD AND ALL REPAIRS ARE PERFORMED BY THE DEALERSHIP AS-IS. THE DEALERSHIP HEREBY DISCLAIMS ALL WARRANTIES, EXPRESS AND IMPLIED, INCLUDING ANY IMPLIED WARRANTIES OF MERCHANTABILITY AND FITNESS FOR A PARTICULAR PURPOSE, AND NEITHER ASSUMES NOR AUTHORIZES ANY OTHER PERSON TO ASSUME FOR IT ANY LIABILITY IN CONNECTION WITH THE SALE OF PARTS OR ACCESSORIES OR ANY REPAIRS PERFORMED TO THE VEHICLE. THE ONLY WARRANTIES ON PARTS AND ACCESSORIES OR REPAIRS ARE THOSE WHICH MAY BE OFFERED BY THE MANUFACTURER OR DISTRIBUTOR AND ONLY SUCH MANUFACTURER OR DISTRIBUTOR SHALL BE LIABLE FOR PERFORMANCE UNDER SUCH WARRANTIES. CUSTOMER SHALL NOT BE ENTITLED TO RECOVER FROM THE DEALERSHIP ANY CONSEQUENTIAL DAMAGES, DAMAGES TO PROPERTY, DAMAGES FOR LOSS OF USE, LOSS OF TIME, LOSS OF PROFIT OR INCOME, OR ANY OTHER INCIDENTAL DAMAGES.

***SHOP SUPPLY COSTS:** We have added a charge equal to 10% of the total cost of labor and parts, not to exceed \$40.00, to the Repair Order. This charge represents costs and profits to the motor vehicle repair facility for miscellaneous shop supplies and waste disposal. The State of Florida requires a \$1.00 fee to be collected for each new tire sold in the state [s.403.718], and a \$1.50 fee to be collected for each new or remanufactured lead-acid battery sold in the state [s.403.7185].

By signing below, you acknowledge that you were notified of and authorized the Dealership to perform the services/repairs and a \$1.50 fee to be collected for each new or remanufactured lead-acid battery sold in the state [s.403.7185].

vehicle is being returned to you in exchange for your payment of the Amount Due.

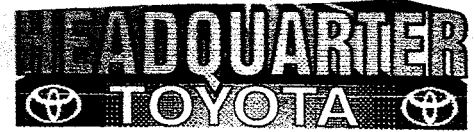
DESCRIPTION	TOTALS
LABOR AMOUNT	494.65
PARTS AMOUNT	2638.00
GAS, OIL, LUBE	0.00
SUBLET AMOUNT	0.00
MISC. CHARGES *	40.00
TOTAL CHARGES	3172.65
LESS INSURANCE	0.00
SALES TAX	222.09
PLEASE PAY THIS AMOUNT	3394.74

DATE CUSTOMER SIGNATURE

AUTHORIZED DEALERSHIP REPRESENTATIVE SIGNATURE:

Section 501.98, Florida Statutes, requires that, at least 30 days before bringing any claim against a motor vehicle dealer for an unfair or deceptive trade practice, a consumer must provide the dealer with a written demand letter stating the name, address, and telephone number of the consumer; the name and address of the dealer; a description of the facts that serve as the basis for the claim; the amount of damages; and copies of any documents in the possession of the consumer which relate to the claim. Such notice must be delivered by the United States Postal Service or by a nationally recognized carrier, return receipt requested, to the address where the subject vehicle was purchased or leased or where the subject transaction occurred, or where the dealer regularly conducts business.

CUSTOMER #:



INVOICE

Service, Parts
5895 N.W. 167th Street

Collision Center
5825 N.W. 167th Str

Miami, Florida 33015
Telephone: (305) 364-9800
www.headquartertoyota.com

PAGE 2

Service: MV-4218 MVR-00173 Body Shop: MV-62804 MVR-100!

MIAMI, FL. [REDACTED]
HOME: [REDACTED]
BUS: [REDACTED]

CONT: [REDACTED]
CELL: [REDACTED]

SERVICE ADVISOR: 389 EDDY SUAREZ

COLOR	YEAR	MAKE/MODEL	VIN	LICENSE	MILEAGE IN / OUT	TAG	
BLUE	08	TOYOTA HIGHLANDER	JTEEW41A582 [REDACTED]		70532/70533	TE729	
DEL. DATE	PROD. DATE	WARR. EXP.	PROMISED	PO NO.	RATE	PAYMENT	INV. DATE
18DEC07 IS							
18DEC07 DD			19:30 10SEP16		0.00	CHECK	14SEP16
R.O. OPENED	READY	OPTIONS:	STK:	DLR:			
17:20 07SEP16	08:42 14SEP16						

LINE	OPCODE	TECH	TYPE	HOURS	LIST	NET	TOTAL	
			C	0.00		0.00	0.00	
PARTS:				0.00	LABOR:	0.00	OTHER:	0.00
					TOTAL LINE D:		0.00	

E DECLINED CAR WASH
 DWASH DECLINED CAR WASH
 237 BALGOBIN, SATISH LIC#: 12345
 C 0.00 0.00 0.00
 PARTS: 0.00 LABOR: 0.00 OTHER: 0.00 TOTAL LINE E: 0.00

F** REPLACE BRAKE ACTUATOR ASSY
 MISC REPLACE BRAKE ACTUATOR ASSY
 237 BALGOBIN, SATISH LIC#: 12345
 C 3.00 330.70 330.70
 1 44050-48320 ACTUATOR ASSY, BRAKE 2616.24
 SATISH 12:37 PM
 PARTS: 2616.24 LABOR: 330.70 OTHER: 0.00 TOTAL LINE F: 2946.94

G** BLEED BRAKE SYSTEM
 BFS BRAKE FLUID SERVICE
 237 BALGOBIN, SATISH LIC#: 12345
 C 1.50 163.95 163.95
 1 6002 DOT3 BRAKE FLUID 21.76
 PARTS: 21.76 LABOR: 163.95 OTHER: 0.00 TOTAL LINE G: 185.71

WARRANTY DISCLAIMER: ALL PARTS AND ACCESSORIES ARE SOLD AND ALL REPAIRS ARE PERFORMED BY THE DEALERSHIP AS-IS. THE DEALERSHIP HEREBY DISCLAIMS ALL WARRANTIES, EXPRESS AND IMPLIED, INCLUDING ANY IMPLIED WARRANTIES OF MERCHANTABILITY AND FITNESS FOR A PARTICULAR PURPOSE, AND NEITHER ASSUMES NOR AUTHORIZES ANY OTHER PERSON TO ASSUME FOR IT ANY LIABILITY IN CONNECTION WITH THE SALE OF PARTS OR ACCESSORIES OR ANY REPAIRS PERFORMED TO THE VEHICLE. THE ONLY WARRANTIES ON PARTS AND ACCESSORIES OR REPAIRS ARE THOSE WHICH MAY BE OFFERED BY THE MANUFACTURER OR DISTRIBUTOR AND ONLY SUCH MANUFACTURER OR DISTRIBUTOR SHALL BE LIABLE FOR PERFORMANCE UNDER SUCH WARRANTIES. CUSTOMER SHALL NOT BE ENTITLED TO RECOVER FROM THE DEALERSHIP ANY CONSEQUENTIAL DAMAGES, DAMAGES TO PROPERTY, DAMAGES FOR LOSS OF USE, LOSS OF TIME, LOSS OF PROFIT OR INCOME, OR ANY OTHER INCIDENTAL DAMAGES.

***SHOP SUPPLY COSTS:** We have added a charge equal to 10% of the total cost of labor and parts, not to exceed \$40.00, to the Repair Order. This charge represents costs and profits to the motor vehicle repair facility for miscellaneous shop supplies and waste disposal. The State of Florida requires a \$1.00 fee to be collected for each new tire sold in the state [s.403.718], and a \$1.50 fee to be collected for each new or remanufactured lead-acid battery sold in the state [s.403.7185].

By signing below, you acknowledge that you were notified of and authorized the Dealership to perform the services/repairs itemized in this invoice and that you received (or had the opportunity to inspect) any replaced parts as requested by you. The vehicle is being returned to you in exchange for your payment of the Amount Due.

DATE	CUSTOMER SIGNATURE	AUTHORIZED DEALERSHIP REPRESENTATIVE SIGNATURE	DESCRIPTION	TOTALS
			LABOR AMOUNT	
			PARTS AMOUNT	
			GAS, OIL, LUBE	
			SUBLET AMOUNT	
			MISC. CHARGES *	
			TOTAL CHARGES	
			LESS INSURANCE	
			SALES TAX	
			PLEASE PAY THIS AMOUNT	

Section 501.98, Florida Statutes, requires that, at least 30 days before bringing any claim against a motor vehicle dealer for an unfair or deceptive trade practice, a consumer must provide the dealer with a written demand letter stating the name, address, and telephone number of the consumer; the name and address of the dealer; a description of the facts that serve as the basis for the claim; the amount of damages; and copies of any documents in the possession of the consumer which relate to the claim. Such notice must be delivered by the United States Postal Service or by a nationally recognized carrier, return receipt requested, to the address where the subject vehicle was purchased or leased or where the subject transaction occurred, or an address at which the dealer regularly conducts business.

Customer X _____ Customer X _____

CUSTOMER #:



INVOICE

Service, Parts
5895 N.W. 167th Street

Collision Center
5825 N.W. 167th Street

Miami, Florida 33015
Telephone: (305) 364-9800
www.headquartertoyota.com

Service: MV-4218 MVR-00173 Body Shop: MV-62804 MVR-1009

MIAMI, FL

PAGE 1

HOME: [REDACTED] CONT: [REDACTED]

BUS: [REDACTED] CELL: [REDACTED]

SERVICE ADVISOR: 389 EDDY SUAREZ

COLOR	YEAR	MAKE/MODEL	VIN	LICENSE	MILEAGE IN / OUT	TAG	
BLUE	08	TOYOTA HIGHLANDER	JTEEW41A582		70532/70533	TE729	
DEL. DATE	PROD. DATE	WARR. EXP.	PROMISED	PO NO.	RATE	PAYMENT	INV. DATE
18DEC07 IS							
18DEC07 DD			19:30 10SEP16		0.00	CHECK	14SEP16
R.O. OPENED	READY	OPTIONS: STK: [REDACTED] DLR: [REDACTED]					

17:20 07SEP16 08:42 14SEP16

LINE	OPCODE	TECH	TYPE	HOURS	LIST	NET	TOTAL
------	--------	------	------	-------	------	-----	-------

A GUEST STATE VEH THE ABS LIGHT IS ON
MISC MISCELLANEOUS REPAIR

237 BALGOBIN, SATISH LIC#: 12345
C 0.00

PARTS: 0.00 LABOR: 0.00 OTHER: 0.00 TOTAL LINE A: 0.00

B Courtesy Vehicle Inspection
SETOY-VIS Courtesy Vehicle Inspection

237 BALGOBIN, SATISH LIC#: 12345
C 0.00

PARTS: 0.00 LABOR: 0.00 OTHER: 0.00 TOTAL LINE B: 0.00

C NO RECALLS AT THIS TIME
NOR NO RECALLS AT THIS TIME

237 BALGOBIN, SATISH LIC#: 12345
C 0.00

PARTS: 0.00 LABOR: 0.00 OTHER: 0.00 TOTAL LINE C: 0.00

D BY SIGNING THIS FORM, YOU AGREE THAT WE MAY CONTACT YOU BY TEXT MESSAGE & HOLD HARMLESS HEADQUARTER TOYOTA FROM ANY LIABILITY INCURED AS A RESULT OF MY ACCEPTANCE OF THESE TERMS, IF YOU LIKE TO STOP, SUBMIT IN WRITING & ALLOW 30 DAYS
TEXT BY SIGNING THIS FORM, YOU AGREE THAT WE MAY CONTACT YOU BY TEXT MESSAGE & HOLD HARMLESS HEADQUARTER TOYOTA FROM ANY LIABILITY INCURED AS A RESULT OF MY ACCEPTANCE OF THESE TERMS, IF YOU LIKE TO STOP, SUBMIT IN WRITING & ALLOW 30 DAYS

237 BALGOBIN, SATISH LIC#: 12345

DESCRIPTION	TOTALS
LABOR AMOUNT	
PARTS AMOUNT	
GAS, OIL, LUBE	
SUBLET AMOUNT	
MISC. CHARGES *	
TOTAL CHARGES	
LESS INSURANCE	
SALES TAX	
PLEASE PAY THIS AMOUNT	

WARRANTY DISCLAIMER: ALL PARTS AND ACCESSORIES ARE SOLD AND ALL REPAIRS ARE PERFORMED BY THE DEALERSHIP AS-IS. THE DEALERSHIP HEREBY DISCLAIMS ALL WARRANTIES, EXPRESS AND IMPLIED, INCLUDING ANY IMPLIED WARRANTIES OF MERCHANTABILITY AND FITNESS FOR A PARTICULAR PURPOSE, AND NEITHER ASSUMES NOR AUTHORIZES ANY OTHER PERSON TO ASSUME FOR IT ANY LIABILITY IN CONNECTION WITH THE SALE OF PARTS OR ACCESSORIES OR ANY REPAIRS PERFORMED TO THE VEHICLE. THE ONLY WARRANTIES ON PARTS AND ACCESSORIES OR REPAIRS ARE THOSE WHICH MAY BE OFFERED BY THE MANUFACTURER OR DISTRIBUTOR AND ONLY SUCH MANUFACTURER OR DISTRIBUTOR SHALL BE LIABLE FOR PERFORMANCE UNDER SUCH WARRANTIES. CUSTOMER SHALL NOT BE ENTITLED TO RECOVER FROM THE DEALERSHIP ANY CONSEQUENTIAL DAMAGES, DAMAGES TO PROPERTY, DAMAGES FOR LOSS OF USE, LOSS OF TIME, LOSS OF PROFIT OR INCOME, OR ANY OTHER INCIDENTAL DAMAGES.

*SHOP SUPPLY COSTS: We have added a charge equal to 10% of the total cost of labor and parts, not to exceed \$40.00, to the Repair Order. This charge represents costs and profits to the motor vehicle repair facility for miscellaneous shop supplies and waste disposal. The State of Florida requires a \$1.00 fee to be collected for each new tire sold in the state [s.403.718], and a \$1.50 fee to be collected for each new or remanufactured lead-acid battery sold in the state [s.403.7185].

By signing below, you acknowledge that you were notified of and authorized the Dealership to perform the services/repairs itemized in this invoice and that you received (or had the opportunity to inspect) any replaced parts as requested by you. The vehicle is being returned to you in exchange for your payment of the Amount Due.

DATE CUSTOMER SIGNATURE AUTHORIZED DEALERSHIP REPRESENTATIVE SIGNATURE

Section 501.98, Florida Statutes, requires that, at least 30 days before bringing any claim against a motor vehicle dealer for an unfair or deceptive trade practice, a consumer must provide the dealer with a written demand letter stating the name, address, and telephone number of the consumer; the name and address of the dealer; a description of the facts that serve as the basis for the claim; the amount of damages; and copies of any documents in the possession of the consumer which relate to the claim. Such notice must be delivered by the United States Postal Service or by a nationally recognized carrier, return receipt requested, to the address where the subject vehicle was purchased or leased or where the subject transaction occurred, or an address at which the dealer regularly conducts business.

Customer X

Customer X

ALL PARTS ARE NEW UNLESS OTHERWISE INDICATED.

CUSTOMER COPY