



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
31-JAN-2017
APR 04 2017

Repository
Reference No.
10948685

OWNER INFORMATION (Type or Print)

Name [Redacted]
Address [Redacted]
City BELOIT State WI Zip Code [Redacted]

Daytime Telephone Number [Redacted]
Evening Telephone Number [Redacted]

E-mail Address [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
1NXBR32E562 [Redacted] Make TOYOTA Model COROLLA Model Year 2006
Date Purchased [Redacted] Dealer's Name and Telephone Number [Redacted] Engine: 1,8L No: Cylinders 4 Fuel Type: Reg. Unleaded
Original Owner Dealer's City [Redacted] State [Redacted] Zip Code [Redacted]
Transmission Type Auto Antilock Brakes Cruise Control Powertrain [Redacted] Multiple Failure: [Redacted] Incident Date(s) 16-JUN-2015

FAILED COMPONENT(S)/PART(S) INFORMATION

Vehicle Component Code: 140000 AIR BAGS Failure Mileage [Redacted] Failure Speed [Redacted]

ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A TIRE FAILURE

Tire Make [Redacted] Tire Model (Name or Number) [Redacted] Tire Size (Example P215/65R15) [Redacted]
DOT No. (Example: DOTM19ABC036) Original Equipment Prior Repair Failure Location: [Redacted]
Tire Component Code [Redacted] Tire Failure Type: [Redacted]

ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A CHILD SEAT FAILURE

Make: [Redacted] Date Manufactured: [Redacted] Model No./Name: [Redacted]
Seat Type: [Redacted] Installation System: [Redacted]
Child Seat Component Code: [Redacted] Failed Part: [Redacted]

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 [Redacted] Number of Deaths [Redacted] 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 RECALL WAS NOT REPAIRED. THE CONTACT DID NOT WANT THE NEW TAKATA AIR BAG INFLATOR EXCHANGED WITH THE DEFECTIVE ONE. THE CONTACT HAD NO FAITH IN TAKATA'S MANUFACTURING. THE MANUFACTURER WAS MADE AWARE OF THE ISSUE. THE CONTACT HAD NOT EXPERIENCED A FAILURE. PARTS DISTRIBUTION DISCONNECT.

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)

I am asking for a non-Takata replacement to complete this recall. The dealer and Toyota have not meet this request. I know other brands were manufactured per NHTSA website. Please help by getting Toyota to provide a non-takata part to complete this recall. I am unable to use the passenger front seat of my vehicle due to fear of injury to the occupant. Thank you.

ATTACH ADDITIONAL SHEETS IF NECESSARY

U.S. Department of Transportation

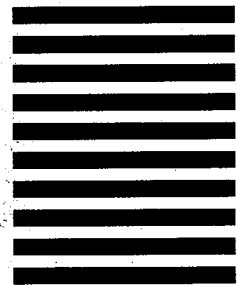
National Highway Traffic Safety Administration

1200 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

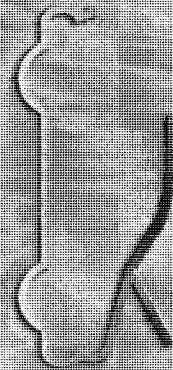
FIRST CLASS MAIL PERMIT NO. 1888 WASHINGTON, DC

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.safercar.gov

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



Vehicle Defects Investigation Office (AD-302)
U.S. Department of Transportation
National Highway Traffic Safety Administration

