



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

FOR AGENCY USE ONLY 100148

Date Received

24-MAR-2017

Repository ☐

Reference No.
10968336

OWNER INFORMATION (Type or Print)

Name [REDACTED]

Address [REDACTED]

City FLEMINGTON

State NJ

Zip Code [REDACTED]

Daytime Telephone Number

[REDACTED]

E-mail Address

[REDACTED]

Evening Telephone Number

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

4T1BE46K77L [REDACTED]

Make
TOYOTA

Model
CAMRY

Model Year
2007

Date Purchased

Dealer's Name and Telephone Number

Engine:
No: Cylinders

Fuel Type:

Original Owner
☐

Dealer's City

State

Zip Code

Transmission Type

☐ Antilock Brakes

Powertrain

Multiple Failure:

Incident Date(s)

☐ Cruise Control

15-MAR-2017

FAILED COMPONENT(S)/PART(S) INFORMATION

Vehicle Component Codes: 150000 SEAT BELTS, 140000 AIR BAGS

Failure Mileage
187000

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 2007 TOYOTA CAMRY. WHENEVER THE SEAT BELT WAS CONNECTED, THE AIR BAG WARNING INDICATOR ILLUMINATED. THE CONTACT TOOK THE VEHICLE TO A DEALER WHO INFORMED THE CONTACT THAT THERE WAS AN OUT-OF-POCKET DIAGNOSTIC FEE BECAUSE THERE WERE NO RECALLS OR WARRANTIES RELATED TO THE FAILURE. THE MANUFACTURER WAS NOTIFIED OF THE FAILURE. THE FAILURE MILEAGE WAS APPROXIMATELY 187,000.

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.