

U.S. Department of Transportation <b>National Highway Traffic Safety Administration</b>		<b>Vehicle Owner's Questionnaire</b> 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	
Name: [REDACTED]		Date Received: 02-APR-2020 <b>JUL 16 2020</b>		Repository <input type="checkbox"/> Reference No. 11320083	
Address: [REDACTED]		Daytime Telephone Number: [REDACTED]		E-mail Address: [REDACTED]	
City: CORONADO State: CA Zip Code: [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).					
<b>VEHICLE INFORMATION</b>					
17 digit Vehicle Identification Number: Located at bottom of windshield or driver's side: 2T2ZZMCA2KC1 [REDACTED]		Make: LEXUS	Model: RX350	Model Year: 2019	
Date Purchased: 4-20-19	Dealer's Name and Telephone Number: LEXUS SAN DIEGO 858-268-8000		Engine: No. Cylinders:	Fuel Type: Premium	
Original Owner: <input checked="" type="checkbox"/>	Dealer's City: SAN DIEGO	State: CA	Zip Code: 92111		
Transmission Type:	<input checked="" type="checkbox"/> Antilock Brakes	Powertrain:	Multiple Failure:	Incident Date(s): 15-JAN-2020	
<input checked="" type="checkbox"/> Cruise Control					
<b>FAILED COMPONENT(S)/PART(S) INFORMATION</b>					
Vehicle Component Code: FUEL/PROPULSION SYSTEM (PWS)			Failure Mileage: 0	Failure Speed: 0	
<b>ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A TIRE FAILURE</b>					
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:		
<b>ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A CHILD SEAT FAILURE</b>					
Make:	Date Manufactured:	Model No./Name:			
Seat Type:	Installation System:				
Child Seat Component Code:	Failed Part:				
<b>APPLICABLE INCIDENT INFORMATION</b> (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 2019 LEXUS RX350. THE CONTACT RECEIVED NOTIFICATION OF NHTSA CAMPAIGN NUMBER: 20V012000 (FUEL SYSTEM, GASOLINE) HOWEVER, THE PART TO DO THE RECALL REPAIR WAS NOT YET AVAILABLE. THE CONTACT STATED THAT THE MANUFACTURER EXCEEDED A REASONABLE AMOUNT OF TIME FOR THE RECALL REPAIR. THE CONTACT STATED THAT LEXUS SAN DIEGO LOCATED AT (4970 KEARNY MESA RD, SAN DIEGO, CA 92111), EXCEEDED A REASONABLE AMOUNT OF TIME FOR THE RECALL REPAIR. 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 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.					