

APR 05 2002  
 U.S. Department of Transportation  
 National Highway Traffic Safety Administration

**COPIED**

**DOT Auto Safety Hotline**  
**Vehicle Owner's Questionnaire**  
**TO REPORT VEHICLE SAFETY DEFECTS**  
 1-888-DASH-2-DOT  
 (1-888-327-4236)  
 INTERNET: www.nhtsa.dot.gov/hotline

**POSTED**

FOR AGENCY USE ONLY

RECEIVED  
 02 APR - 2  
 OFFICE OF DEFECTS INVESTIGATION  
 564847

**OWNER INFORMATION (Type or Print)**

[Redacted Owner Information]

Do you authorize NHTSA to provide a copy of this report to the manufacturer of your vehicle?  YES  NO  
 Signature of [Redacted] Date 3/13/02

**PRODUCT INFORMATION**

Vehicle Identification No. (VIN) (17 Digits) <u>JT2BF22K7W0143921</u>		Make <u>TOYOTA</u>	Model <u>CAMRY</u>	Year <u>1998</u>
Purchased Date <u>8/26/98</u>	Dealer's Name <u>LONGBO TOYOTA</u>		Engine Size (CID/OCCU) <u>6</u>	<input type="checkbox"/> Turbo <input type="checkbox"/> Diesel <input checked="" type="checkbox"/> Gas <input checked="" type="checkbox"/> Fuel Injection
<input checked="" type="checkbox"/> New <input type="checkbox"/> Used	Dealer's City <u>EL MONTE</u>	State <u>CA</u>	No. Cylinders	
Manufacture Date (on driver's door or pillar) <u>7/98</u>	Transmission Type <input type="checkbox"/> Manual <input checked="" type="checkbox"/> Automatic	Restraint System <input checked="" type="checkbox"/> Driverside Air Bag <input checked="" type="checkbox"/> Passengerside Air Bag <input checked="" type="checkbox"/> 3-Point Belt	Cruise Control <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Drivetrain <input checked="" type="checkbox"/> Front <input type="checkbox"/> Rear <input type="checkbox"/> 4-Wheel
		Vehicle Type <input checked="" type="checkbox"/> Car <input type="checkbox"/> Van <input type="checkbox"/> Minivan <input type="checkbox"/> Other	Body Style <input type="checkbox"/> 2-door <input type="checkbox"/> Stationwagon <input type="checkbox"/> Pick Up Truck <input checked="" type="checkbox"/> 4-Door <input type="checkbox"/> Other	

**FAILED COMPONENT(S)/PART(S) INFORMATION**

Part Name(s) <u>THROTTLE</u>	Location <input type="checkbox"/> Left <input checked="" type="checkbox"/> Front	<input type="checkbox"/> Right <input type="checkbox"/> Rear	Failed Part(s) <input checked="" type="checkbox"/> Original <input type="checkbox"/> Replacement	Handicap Adaptive Equip <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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**TO BE COMPLETED WHEN REPORTING A TIRE FAILURE**

Tire Brand	Tire Name		
Complete Tire Size	DOT No.		
No. of Failures	Date(s) of Failure(s)	Failed Part(s) Available?	NHTSA Previously Contacted?
	Mileage at Failure(s)	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
	Vehicle Speed at Failure(s)		

**APPLICABLE INCIDENT INFORMATION**

(Please describe in detail the Incident(s), Failure(s), Crash(es), and Injury(ies). Attach photos if available.)

Crash <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Fire <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Number of Persons Injured <u>0</u>	Number of Fatalities <u>0</u>	Reported to Manufacturer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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Narrative Description of Incident(s), Failure(s), Crash(es), and Injury(ies).  
ON 2 SEPARATE OCCASIONS THE THROTTLE APPARENTLY ENGAGED BY ITSELF CAUSING THE CAR TO LURCH UP IN THE AIR AND FORWARD.

Continue on back.

The Privacy Act of 1974 - Public Law 93-579 This information is requested pursuant to 49 U.S.C. Chapter 301. You are under no obligation to respond to this questionnaire. Your response may be used to assist NHTSA in determining whether a manufacturer should take appropriate action to correct a safety defect. If NHTSA proceeds with administration enforcement or litigation against a manufacturer, your response, or a statistical summary thereof, may be used in support of the agency's action.

Mall postage free or fax to 202-366-7882