



U.S. Department
of Transportation

National Highway
Traffic Safety
Administration

Auto Safety Hotline

Vehicle Owner's Questionnaire

NATIONWIDE 1-800-424-9393
DC METRO AREA (202) 366-0123
INTERNET: <http://www.nhtsa.dot.gov>

FOR AGENCY USE ONLY 258

Date Received

09-SEP-2001

Od_or _____
rt_dt _____
pd_rt _____
rp_lr _____

Reference No.

751959

Do you authorize NHTSA to provide a copy of report to the manufacturer of your vehicle? YES NO
In the absence of an authorization, NHTSA WILL NOT provide your name and address to the vehicle manufacturer.

Signature of Owner _____ Date ____/____/____

VEHICLE INFORMATION

Vehicle Ident. No. (VIN) <small>(Location at bottom of and/or above driver's side)</small>	Vehicle Make	Vehicle Model	Vehicle Year	Current Odometer Reading		
2T1AE09B9SC103405	TOYOTA	COROLLA	1995			
Purchase Date 01-JAN-1995	Dealer's Name _____	Engine Size (CID/CC/L) 1.8 L	<input type="checkbox"/> Turbo <input type="checkbox"/> Diesel <input type="checkbox"/> Gas <input type="checkbox"/> Fuel Injectio			
<input checked="" type="checkbox"/> New <input type="checkbox"/> Used	City _____ State _____ Zip Code _____	No Cylinders _____				
Transmission Type <input type="checkbox"/> Manual <input type="checkbox"/> Automatic	Antilock Brakes <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Restraint System <input checked="" type="checkbox"/> 3-Point Belt <input type="checkbox"/> Motorbelt <input type="checkbox"/> Driverside Airbag <input type="checkbox"/> 2-Point Bel <input type="checkbox"/> Passengerside Airbag	Cruise Control <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Drive Train <input checked="" type="checkbox"/> Front <input type="checkbox"/> Rear <input type="checkbox"/> 4-Wheel	Vehicle Type <input type="checkbox"/> Car <input type="checkbox"/> Sport Util <input type="checkbox"/> Van <input type="checkbox"/> Truck <input type="checkbox"/> Minivan <input type="checkbox"/> Motorcycle <input type="checkbox"/> Other _____	Body Style <input type="checkbox"/> 2-Door <input checked="" type="checkbox"/> 4-Door <input type="checkbox"/> Stationwagon <input type="checkbox"/> Pick Up Truck <input type="checkbox"/> Other _____

FAILED COMPONENT(S)/PART(S) INFORMATION

Component 05130000	Part Name(s) ENGINE:PULLEY:CRANKSHAFT	Location <input type="checkbox"/> Left <input type="checkbox"/> Right <input type="checkbox"/> Front <input type="checkbox"/> Rear	Failed Part's <input type="checkbox"/> Original <input type="checkbox"/> Replacement
No of Failure 1	Date(s) of Failure(s) 15-AUG-2001 51981 Mileage at Failure(s) 65	Failed Part(s) <input type="checkbox"/> Yes <input type="checkbox"/> No	NHTSA Previously <input type="checkbox"/> Yes <input type="checkbox"/> No

APPLICATION INCIDENT INFORMATION

(Please describe in detail the incident(s), Failure(s), Crash(es), and injury(ies) on the back of this form)

Crash <input type="checkbox"/> Yes <input type="checkbox"/> No	Fire <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Number of Persons Injured 0	Number of Fatalities 0	Estimated Property Damag	Reported to Police <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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NARRATIVE DESCRIPTION OF FAILURE(S), INCIDENT(S), INJURY(IES)

WHILE DRIVING TO BOSTON FROM CONNECTICUT ON INTERSTATE HIGHWAY 91, I HEARD A FAINT THUMP SOUND THINKING THAT I DROVE OVER DEBRIS ON THE ROAD I CONTINUED DRIVING. ABOUT HALF AN HOUR LATER I HEARD ANOTHER "THUMP" SOUND BUT THIS ONE WAS STRONGER THAN THE FIRST ONE. SINCE I HAD BEEN TAKING CARE OF THE CAR BASED ON THE MANUFACTURER'S SPECIFICATION I NEVER SUSPECTED TO ENCOUNTER MAJOR BREAKAGE FROM THE CAR; SO THINKING THAT I AM SAFE I CONTINUED DRIVING. ALL OF A SUDDEN THE AIR CONDITIONER STARTED BLOWING WARM AIR, PUZZLED I TURNED OFF THE AIR CONDITIONER AND THE RADIO AND STARTED SIGNALING TO GO ON THE BROKEN LANE TO CHECK THE REASON. BEFORE I COULD GET A CHANCE TO GET ONTO THE BROKEN LANE THE BATTERY SIGNAL LIGHT LIGHTED UP, SCARED THAT THE CAR WOULD STOP IN THE MIDDLE OF THE HIGHWAY

CONTINUE ON REVERSE

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.

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RECEIVED

01 SEP 18 2001

OFFICE
DEFECTS INVESTIGATION

ODI 8751959

U.S. Department of Transportation
National Highway Safety Administration
Office of Defect Investigation
NSA-10.01
400 7th Street South West
Washington, DC 20590

To Whom It May Concern:

I filed a report through the Internet on 09/08/2001, ODI Number: ~~751959~~, concerning the breakdown of my 1995 Toyota Corolla. As I have mentioned on that report I have enclosed the copy of the letter I mailed to the manufacturer.

If you need the maintenance record of my 1995 Toyota Corolla or if there is any form that I need to fill out please send me your request or the additional form on the above address. I will be more than glad to send all the information in my possession to help speed up your investigation of the incident.

Please send me any information that you come across that would alleviate the fear that this incident instilled in me.

Thank you for your time and assistance.

Regards,

[Redacted]
[Redacted] 9/11/01
[Redacted]

**THE FOLLOWING PAGES ARE WITHHELD TO
PROTECT UNWARRANTED INVASION OF
PERSONAL PRIVACY PURSUANT TO
EXEMPTION 6 OF THE FREEDOM OF
INFORMATION ACT (FOIA), 5 U.S.C. 552(b)(6)**

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