

785826

From: feedback@cartalk.com
To: Alberto <NHTSA> Jimenez
Date: 12/27/01 9:57AM
Subject: Car Talk VOQ submission

* This data was submitted via a fill-in form at the Cartalk web site
* (<http://www.cartalk.cars.com/Tools/nhtsa.pl>) If you have any problems
* or suggestions regarding the format of this submission, send email
* to webmaster@cartalk.com

SUBMISSION DATE: Thursday, December 27th 2001 at 9:46:38 AM

VEHICLE OWNER'S QUESTIONNAIRE
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OWNER INFORMATION

NAME
ADDRESS
TELEPHONE



NHTSA authorized to send a copy of this report to the manufacturer: No

VEHICLE INFORMATION

VIN: 4T1SK12E4RU356535
MAKE: Toyota
MODEL: Camry
YEAR: 1994

ODOMETER: 112000
PURCHASE DATE: 12/28/93
NEW OR USED: New

DEALER NAME: Westside Toyota, Inc.,
ADDRESS: Jacksonville, FL 32205

ENGINE SIZE: 4
CYLINDERS: 4

FUEL INJECTION: Yes
TURBO: No
FUEL TYPE: Gas
ANTILOCK BRAKES: Yes
CRUISE CONTROL: Yes

DRIVETRAIN: Front
DRIVER AIRBAG: Yes
PASSENGER AIRBAG: Yes
3-POINT BELT: Yes
MOTOR BELT: No
2-POINT BELT: No
BODY STYLE: 4-Door

FAILED COMPONENT(S)/PART(S) INFORMATION

COMPONENT: Airbag

PART NAME(S): Driver side and Passenger Airbag

LOCATION: Left Front

NUMBER OF FAILURES: 1 crash and it failed to
deploy

DATE(S) OF FAILURES: April 7, 1998

MILEAGE AT FAILURE(S):

SPEED AT FAILURE(S): 45

MANUFATURER CONTACTED: Yes

NHTSA CONTACTED: No

APPLICABLE ACCIDENT INFORMATION

ACCIDENT: Yes
FIRE: No

NUMBER OF PERSONS INJURED: 0
NUMBER OF FATALITIES: 0
ESTIMATED PROPERTY DAMAGE: \$3500

DRIVER AIRBAG DEPLOYED: No
PASSENGER AIRBAG DEPLOYED: No

REPORTED TO POLICE: Yes

INFORMATION ON TIRE FAILURE(S) (IF APPLICABLE)

DOT NUMBER: DOT
TIRE MANUFACTURER:
TIRE NAME:
TIRE SIZE:

ADDITIONAL COMMENTS

I know it has been a long time since this accident occurred but I didn't have a computer at the time. I also read an article today, Dec. 27, 2001, that gave me the information I needed to contact you. I didn't realize I could report this here.

At the time of the accident, I was encouraged by the assisting police officer and the mechanic to contact Toyota about the failure. The zone manager apparently inspected my car and determined that nothing unusual had occurred. He told this information to my repairman but never contacted me again. Any help I could receive from you all would be appreciated.

Thanks,

END OF FORM



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 778

Date Received

27-DEC-2001

Od_or _____
rt_dt _____
pd_rt _____
rp_lr _____

Reference No.

785826

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) (Locate at bottom of driver's door and door hinge) 4T1SK12E4RU356535	Vehicle Make TOYOTA	Vehicle Model CAMRY	Vehicle Year 1994	Current Odometer Reading
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Purchase Date 28-DEC-1993	Dealer's Name _____	Engine Size (CID/CC/L 4CYL)	☐ Turbo ☐ Diesel ☐ Gas ☒ Fuel Injection
☒ New ☐ Used	City _____ State _____ Zip Code _____	No Cylinders _____	
Transmission Type ☐ Manual ☐ Automatic	Antilock Brakes ☒ Yes ☐ No	Restraint System ☒ 3-Point Belt ☐ Motorbelt ☐ Driverside Airbag ☐ 2-Point Bel ☐ Passengerside Airbag	Cruise Control ☒ Yes ☐ No
		Drive Train ☒ Front ☐ Rear ☐ 4-Wheel	Vehicle Type ☐ Car ☐ Sport Util ☐ Van ☐ Truck ☐ Minivan ☐ Motorcycle ☐ Other _____
			Body Style ☐ 2-Door ☒ 4-Door ☐ Stationwagon ☐ Pick Up Truck ☐ Other _____

FAILED COMPONENT(S)/PART(S) INFORMATION

Component 12111000	Part Name(s) INTERIOR SYSTEMS: PASSENGER RESTRAINTS: AIR BAG: FRONT,	Location ☐ Left ☐ Right ☐ Front ☐ Rear	Failed Part(s) ☐ Original ☐ Replacement
No of Failure 1	Date(s) of Failure(s) 07-APR-1998	Failed Part(s) ☐ Yes ☐ No	NHTSA Previously ☐ Yes ☐ No
	Mileage at Failure(s) _____		
	Vehicle Speed at Failure(s) 45		

APPLICATION INCIDENT INFORMATION

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

Crash ☐ Yes ☐ No	Fire ☐ Yes ☒ No	Number of Persons Injured	Number of Fatalities	Estimated Property Damag	Reported to Police ☒ Yes ☐ No
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NARRATIVE DESCRIPTION OF FAILURE(S), INCIDENT(S), INJURY(IES)

CONSUMER HAD AN ACCIDENT AND AIR BAGS FAILED TO DEPLOY. *JG

COPIES OF THIS FORM ARE:

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.