



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 436

Date Received

08-FEB-2002

Od_or _____
rt_dt _____
od_rt _____
ip_lr _____

Reference No.

8003811

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) _____ (Location at bottom of windshield and driver's side door)		Vehicle Make TOYOTA TRUCK	Vehicle Model PICKUP	Vehicle Year 1986	Current Odometer Reading _____
Purchase Date _____	Dealer's Name _____		Engine Size (CID/CC/L) _____	☐ 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 Utl ☐ Van ☐ Truck ☐ Minivan ☐ Motorcycle ☐ Other _____ Body Style ☐ 2-Door ☐ 4-Door ☐ Stationwagon ☒ Pick Up Truck ☐ Other _____

FAILED COMPONENT(S)/PART(S) INFORMATION

Component 08122000 13131000	Part Name(s) FUEL:FUEL LINES:HOSES:NON-METALLIC STRUCTURE:BODY:WHEEL WELL	Location ☐ Left ☐ Right ☐ Front ☐ Rear	Failed Part(s) ☐ Original ☐ Replacement
No of Failure _____	Dates of Failure(s) 08-FEB-2002	Failed Part(s) ☐ Yes ☐ No	NHTSA Previously ☐ Yes ☐ No
	Mileage at Failure(s) _____		
	Vehicle Speed at Failure(s) _____		

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)

WHEEL WELDS RUSTED BENEATH VEHICLE. CONSUMER CHAINED GAS HOSE TO VEHICLE DUE TO RUST ON BOTH OF TANKS. DEALER WAS NOTIFIED.*AK

COPIES OF REPORTS - FEB - 02

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.

U.S. Department
of TransportationNational Highway
Traffic Safety
Administration

DOT Auto Safety Hotline

Vehicle Owner's Questionnaire (VOQ)

NATIONWIDE 1-888-DASH-2-DOT

1-888-327-4236

www.nhtsa.dot.gov/hotline

FOR AGENCY USE ONLY 438

Date Received

JUN - 5
08-FEB-2002OFFICE
EFFECTS INVE.Od_or
rt_dt
od_rt
up_ltr

Reference No.

8003811

OWNER INFORMATION (Type or Print)

711196

TAUNTON

MA

Work Number

Home Number

Do you authorize NHTSA
In the absence of an authorized
Signature of Owner

vehicle?

☒ YES☐ NO

Address to the vehicle manufacturer.

Date 4/8/02

VEHICLE INFORMATION

Vehicle Ident. No. (VIN) (Located at bottom of windshield on driver's side) Vehicle Make Vehicle Model Vehicle Year Current Odometer Reading

JT4RN63R9G5016152

TOYOTA TRUCK

PICKUP

1986

145,756

Purchase Date

8-1-86

Dealer's Name Toyota Motor Distributors

Engine Size
(CID/CC/L)

No Cylinders 4

☐ Turbo
☐ Diesel
☐ Gas
☒ Fuel Injection☒ New ☐ Used

City Mansfield State MA Zip Code 02048

Transmission Type ☒ Manual ☐ Automatic	Antilock Brakes ☐ Yes ☒ No	Restraint System ☐ 3-Point Belt ☐ Driverside Airbag ☐ Passengerside Airbag ☐ Motorbelt ☒ 2-Point Belt	Cruise Control ☐ Yes ☒ No	Drive Train ☐ Front ☐ Rear ☒ 4-Wheel	Vehicle Type ☐ Car ☐ Van ☐ Minivan ☐ Other ☒ Sport Utl ☒ Truck ☐ Motorcycle	Body Style ☒ 2-Door ☐ 4-Door ☐ Stationwagon ☐ Pick Up ☒ Truck
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FAILED COMPONENT(S)/PART(S) INFORMATION

Component 06132000 13131000	Part Name(s) FUEL:FUEL LINES:HOSES:NON-METALLIC STRUCTURE:BODY:WHEEL WELL	Location ☒ Left ☐ Front ☒ Right ☒ Rear	Failed Part(s) ☒ Original ☐ Replacement
No of Failures	Date(s) of Failure(s) 08-FEB-2002 Mileage at Failure(s) Vehicle Speed at Failure(s)	Failed Part(s) ☐ Yes ☐ No	NHTSA Previously ☐ Yes ☐ 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 ☐ Yes ☐ No	Fire ☐ Yes ☐ No	Number of Persons Injured	Number of Fatalities	Estimated Property Damage	Reported to Police ☐ Yes ☐ No
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NARRATIVE DESCRIPTION OF FAILURE(S), INCIDENT(S), INJURY(IES)

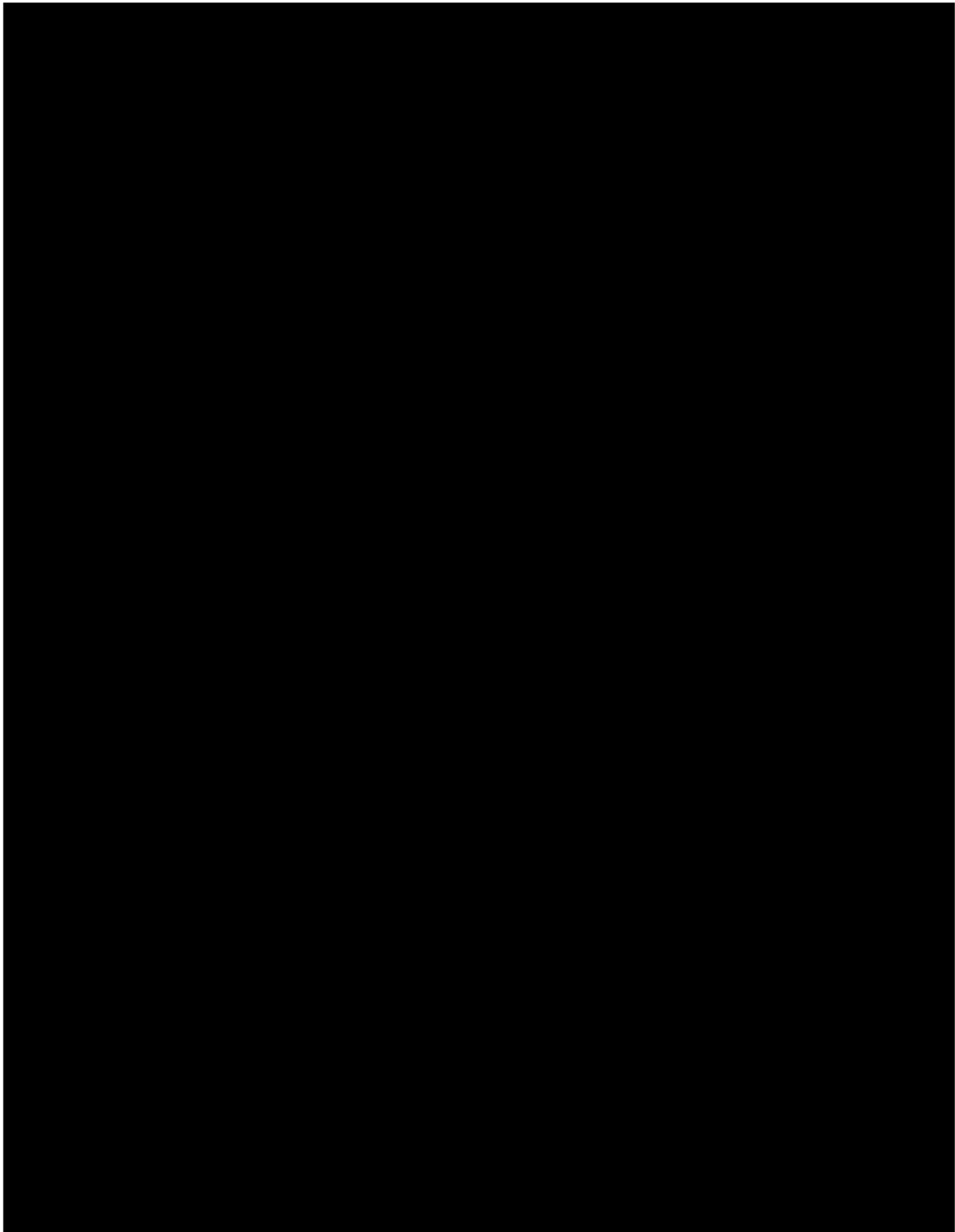
WHEEL WELDS RUSTED BENEATH VEHICLE. CONSUMER CHAINED GAS HOSE TO VEHICLE DUE TO RUST ON BOTH OF TANKS. DEALER WAS NOTIFIED.*AK

CONTINUE ON BACK IF NEEDED

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**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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