Form Approved: OMB No. 2127-0042

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 798

Date Received: 25-MAR-2002

Od_or ____ ____
rt_dt ____ ____
od_rt ____ ____
np_ltr ____ ____

Reference No.: 8006333

[redacted]

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 windshield on driver's side)	Vehicle Make	Vehicle Model	Vehicle Year	Current Odometer Readin
N/A	LEXUS	GS300	2000	

Purchase Dat: ☒ New ☐ Used

Dealer's Name_____

City_____ State_____ Zip Code_____

Engine Size (CID/CC/L _____

No Cylinders _____

☐ Turbo ☐ Diesel ☐ Gas ☐ Fuel Injectio

Transmission Type	Antilock Brakes	Restraint System	Cruise Contro	Drive Trai	Vehicle Type	Body Style
☐ Manual ☐ Automatic	☒ Yes ☐ No	☒ 3-Point Belt ☐ Motorbelt ☐ Driverside Airbag ☐ 2-Point Bel ☐ Passengerside Airbag	☐ Yes ☒ No	☐ Front ☐ Rear ☐ 4-Wheel	☐ Car ☐ Sport Ult ☐ Van ☐ Truck ☐ Minivan ☐ Motorcycle ☐ Other_____	☐ 2-Door ☐ 4-Door ☐ Stationwagon ☐ Pick Up Truck ☐ Other_____

FAILED COMPONENT(S)/PART(S) INFORMATION

Component	Part Name(s	Location	Failed Part(s
06400000	FUEL:**THROTTLE** LINKAGES AND CONTROL	☐ Left ☐ Right ☐ Front ☐ Rear	☐ Original ☐ Replacement

No of Failure	Dates of Failure(s)	Failed Part(s)	NHTSA Previously
	17-OCT-2001		
	Mileage at Failure(s 30000	☐ Yes ☐ No	☐ Yes ☐ No
	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	Fire	Number of Persons Injured	Number of Fatalitie	Estimated Property Damag	Reported to Polic
☐ Yes ☐ No	☐ Yes ☐ No				☐ Yes ☐ No

NARRATIVE DESCRIPTION OF FAILURE(S), INCIDENT(S), INJURY(IES)

VEHICLE STARTED TO ACCELERATE WHILE CONSUMER WAS IN TRAFFIC AT A CONSTANT SPEED OR 25-30 MPH. CONTACTED DEALER, AND THE DEALER WAS NOT WILLING TO DO ANYTHING.*AK

CONTINUED ON NEXT PAGE

Form Approved: O.M.B. No. 2127-0006

U.S. Department of Transportation
National 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 798

Date Received: 02 APR 22 PM 2:
25-MAR-2002
OFFICE OF DEFECTS INVESTIGATION

Od_or
rt_dt
od_rt
up_ltr

Reference No.
8006333

OWNER INFORMATION (Type or Print)

[redacted] 745222

Work Number

Home Numb [redacted]

Do you authorize NHTSA to provide a copy of report to the manufacturer of your vehicle? ☒ YES ☐ NO
In the absence of [illegible] NHTSA WILL NOT provide your name and address to the vehicle manufacturer.

Signature of Owr [redacted] Date 03/28/02

VEHICLE INFORMATION

Vehicle Ident. No. (VIN.) (Located at bottom of windshield on driver's side)	Vehicle Mak	Vehicle Mode	Vehicle Year	Current Odometer Readin
N/A JT8BD68S5Y0086308	LEXUS	GS300	2000	33139

Purchase Date 10/99
☒ New ☐ Used

Dealer's Name [illegible] S. Jimmy Bryan Lexus
City Winter Park State FL Zip Code 32792

Engine Siz (CID/CC/L ____
No Cylinders 6

☐ Turbo ☐ Diesel ☒ Gas ☒ Fuel Injectio

Transmission Type	Antilock Brakes	Restraint System	Cruise Contro	Drive Trai	Vehicle Type	Body Style
☐ Manual ☑ Automatic	☒ Yes ☐ No	☒ 3-Point Bell ☐ Motorbelt ☐ Driverside Airbag ☐ 2-Point Bel ☐ Passengerside Airbag	☐ Yes ☒ No	☐ Front ☐ Rear ☐ 4-Wheel	☑ Car ☐ Sport Uti ☐ Van ☐ Truck ☐ Minivan ☐ Motorcycle ☐ Other	☐ 2-Door ☒ 4-Door Stationwagon ☐ Pick Up ☐ Truck

FAILED COMPONENT(S)/PART(S) INFORMATION

Component	Part Name(s	Location	Failed Part(s
06400000	FUEL:THROTTLE LINKAGES AND CONTROL	☐ Left ☐ Right ☐ Front ☐ Rear	☐ Original ☐ Replacement

No of Failures	Date(s) of Failure(s)	Failed Part(s)	NHTSA Previously
	17-OCT-2001 Mileage at Failure(s) 30000 Vehicle Speed at Failure(s) 25-35 MPH	☐ Yes ☐ No	☐ 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	Fire	Number of Persons Injured	Number of Fatalities	Estimated Property Damage	Reported to Police
☐ Yes ☑ No	☐ Yes ☑ No				☐ Yes ☑ No

NARRATIVE DESCRIPTION OF FAILURE(S), INCIDENT(S), INJURY(IES)

VEHICLE STARTED TO ACCELERATE WHILE CONSUMER WAS IN TRAFFIC AT A CONSTANT SPEED OR 25-30 MPH. CONTACTED DEALER, AND THE DEALER WAS ~~NOT WILLING TO DO~~ could ~~ANYTHING.~~ AK NOT Duplicate the problem. This problem occur at least once a week.

CONTINUE ON BACK IF NEEDED