



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 241

Date Received

10-APR-2002

Od_or _____
rt_dt _____
pd_rt _____
rp_lr _____

Reference No.

8007272

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)		Vehicle Make	Vehicle Model	Vehicle Year	Current Odometer Reading
4T1BG12K0TU949534		TOYOTA	CAMRY	1996	
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	Antilock Brakes	Restraint System	Cruise Control	Drive Train	Vehicle Type
☐ Manual ☐ Automatic	☐ Yes ☒ No	☒ 3-Point Belt ☐ Driverside Airbag ☐ Passengerside Airbag ☐ Motorbelt ☐ 2-Point Belt	☒ Yes ☐ No	☐ Front ☐ Rear ☐ 4-Wheel	☐ Car ☐ Van ☐ Minivan ☐ Other _____ ☐ Sport Utl ☐ Truck ☐ Motorcycle
					Body Style
					☐ 2-Door ☐ 4-Door ☐ Stationwagon ☐ Pick Up Truck ☐ Other _____

FAILED COMPONENT(S)/PART(S) INFORMATION

Component 06351100	Part Name(s) FUEL:FUEL INJECTION:IDLE SPEED CONTROL VALVE	Location ☐ Left ☐ Right ☐ Front ☐ Rear	Failed Part(s) ☐ Original ☐ Replacement
No of Failure 2	Dates of Failure(s) 02-APR-2001 Mileage at Failure(s) 4500 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 Damag	Reported to Police ☐ Yes ☐ No
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NARRATIVE DESCRIPTION OF FAILURE(S), INCIDENT(S), INJURY(IES)

IDLE AIR CONTROL VALVE KEEPS CLOGGING UP. THE DEALER HAS REPLACED IT TWICE, AND PROBLEM HAS REOCCURRED. FEEL FREE TO PROVIDE ANY FURTHER INFORMATION.*AK

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.

RECEIVED

Form Approved: O.M.B. No. 2127-0008

 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 241 Date Received _____ OFFICE INVESTIGATION 10-APR-2002		Od_or _____ rt_dt _____ od_rt _____ up_ltr _____ Reference No. 8007272	
OWNER INFORMATION (Type or Print) [Redacted] 747683 MANALAPAN NJ				Work Number [Redacted] Home Number [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 [Redacted] Date 5-27-2002							
VEHICLE INFORMATION							
Vehicle Ident. No. (VIN) (Locate, starting at windshield on driver's side) 4T1BG12K0TU949534		Vehicle Make TOYOTA		Vehicle Model CAMRY		Vehicle Year 1996	
				Current Odometer Reading 42,435			
Purchase Date 8/27/96		Dealer's Name Freehold Toyota		Engine Siz (CID/CC/L) 2.2 Liter		☐ Turbo ☐ Diesel ☒ Gas ☐ Fuel Inject o	
☒ New ☐ Used		City Freehold State NJ Zip Code 07728		No Cylinders 4			
Transmission Type ☐ Manual ☒ Automatic		Ant lock Brakes ☐ Yes ☒ No		Restraint System ☒ 3-Point Belt ☐ Driverside Airbag ☐ Passengerside Airbag ☐ Motorbelt ☐ 2-Point Bel		Cruise Control ☒ Yes ☐ No	
				Drive Train ☒ Front ☐ Rear ☐ 4-Wheel		Vehicle Type ☒ Car ☐ Van ☐ Minivan ☐ Other	
				Sport Ult Truck ☐ Motorcycle		Body Style ☐ 2-Door ☒ 4-Door ☐ Stationwagon ☐ Pick Up ☐ Truck	
FAILED COMPONENT(S)/PART(S) INFORMATION							
Component 06351100		Part Name(s) FUEL:FUEL INJECTION:IDLE SPEED CONTROL VALVE		Location ☐ Left ☐ Front ☐ Right ☐ Rear		Failed Part(s) ☐ Original ☒ Replacement	
No of Failures 2		Date(s) of Failure(s) 02-APR-2001 15-NOV-1999 Mileage at Failure(s) 4586 41320 23342 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	
NARRATIVE DESCRIPTION OF FAILURE(S), INCIDENT(S), INJURY(IES)							
IDLE AIR CONTROL VALVE KEEPS CLOGGING UP. THE DEALER HAS REPLACED IT TWICE, AND PROBLEM HAS REOCCURRED. FEEL FREE TO PROVIDE ANY FURTHER INFORMATION.*AK <i>Both incidents- trouble starting car. I had to put my foot on the gas pedal to get the car started otherwise it would not start. I have been using fuel injection cleaners prior to first replacement of idle control valve and also up until the replacement in April of this year. Same part replaced within one and one-half years.</i>							
CONTINUE ON BACK IF NEEDED							
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 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.							

**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)**

(Page 1 through Page 4)

10. *Journal of the American Medical Association*, 2000; 283: 2689-2694.

