

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 150

Date Received

06-APR-2000

 Od_or _____
 Rt_dt _____
 od_rt _____
 up_ltr _____

Reference No.

859830

 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) (Listed at front of windshield or driver's door)	Vehicle Make	Vehicle Model	Vehicle Year	Current Odometer Reading
1NXAE09E0P2046012	TOYOTA	COROLLA	1993	

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 ☐ Motorbell ☒ Driverside Airbag ☐ 2-Point Belt ☐ Passengerside Airbag	Cruise Control ☒ Yes ☐ No	Drive Train ☐ Front ☐ Rear ☐ 4-Wheel	Vehicle Type ☐ Car ☐ Sport Ult ☐ Van ☐ Truck ☐ Minivan ☐ Motorcycle ☐ Other _____	Body Style ☐ 2-Door ☐ 4-Door ☐ Stationwagon ☐ Pick Up Truck ☐ Other _____
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FAILED COMPONENT(S)/PART(S) INFORMATION

Component 12112200	Part Name(s) INTERIOR SYSTEMS:PASSIVE RESTRAINT:AIR BAG:SIDE DOOR:DR	Location ☐ Left ☐ Right ☐ Front ☐ Rear	Failed Part(s) ☐ Original ☐ Replacement
No of Failures	Date(s) of Failure(s) 05-APR-2000 Mileage at Failure(s) 3400 Vehicle Speed at Failure(s) _____	Failed Part(s) Available? ☐ Yes ☐ No	NHTSA Previously Contacted? ☐ 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 1	Number of Fatalities	Estimated Property Damage	Reported to Police ☐ Yes ☒ No
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NARRATIVE DESCRIPTION OF FAILURE(S), INCIDENT(S), INJURY(IES)

VEHICLE WAS REARENDED AND PUSHED FORWARD INTO A VEHICLE IN FRONT, DRIVER'S SIDE AIRBAG DEPLOYED, CAUSING LACERATION TO FACE AND CHIN AND BURNS ON CHEST. SEATBELTS WERE WORN AT THE TIME. *AK

CONTINUED ON BACK (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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U.S. Department of Transportation National Highway Traffic Safety Administration		Date Received <u>06-APR-2000</u> OFFICE DEFECTS INVESTIGATION Reference No. <u>859830</u>	
OWNER INFORMATION (Type or Print)			
[Redacted]		601477	
Do you authorize NHTSA to provide a copy of report to the manufacturer of your vehicle? in the absence of an address to the vehicle manufacturer. ☒ YES ☐ NO Signature of Owner _____ Date <u>04/17/00</u>			
VEHICLE INFORMATION			
Vehicle Ident. No. (VIN) (Located at bottom of windshield on driver's side)	Vehicle Make	Vehicle Model	Vehicle Year
1NXAE09E0P2046012	TOYOTA	COROLLA	1993
Purchase Date <u>11-93</u>	Dealer's Name <u>TOYOTA OF LB</u>		Engine Size (CID/CC/L) <u>1.8 LT</u>
☐ New ☒ Used	City <u>LONG BEACH</u> State <u>CA</u> Zip Code <u>90815</u>		No Cylinders <u>4</u>
Transmission Type	Antilock Brakes	Restraint System	Cruise Control
☐ Manual ☒ Automatic	☒ Yes ☐ No	☐ 3-Point Belt ☒ Drivesside Airbag ☐ Passengerside Airbag	☒ Yes ☒ No
Drive Train	Vehicle Type	Body Style	
☒ Front ☐ Rear ☐ 4-Wheel	☒ Car ☐ Van ☐ Minivan ☐ Other	☐ 2-Door ☒ 4-Door ☐ Stationwagon ☐ Pick Up Truck ☐ Other	
FAILED COMPONENT(S)/PART(S) INFORMATION			
Component No. <u>12112200</u>	Part Name(s)	Location	Failed Part(s)
	INTERIOR SYSTEMS: PASSIVE RESTRAINT: AIR BAG: SIDE DOOR: D	☒ Left ☐ Right ☐ Front ☐ Rear	☒ Original ☐ Replacement
No of Failures	Date(s) of Failure(s) <u>05-APR-2000</u> Mileage at Failure(s) <u>9400</u> Vehicle Speed at Failure(s) _____	Failed Part(s) Available? ☐ Yes ☐ No	NHTSA Previously Contacted? ☐ 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
☒ Yes ☐ No	☐ Yes ☒ No	<u>2</u>	
Estimated Property Damage		Reported to Police	
<u>none</u>		☒ Yes ☐ No	
NARRATIVE DESCRIPTION OF FAILURE(S), INCIDENT(S), INJURY(IES)			
VEHICLE WAS REARENDED AND PUSHED FORWARD INTO A VEHICLE IN FRONT, DRIVER'S SIDE AIRBAG DEPLOYED, CAUSING LACERATION TO FACE AND CHIN AND BURNS ON CHEST. SEATBELTS WERE WORN AT THE TIME. *AK <u>Seat Belt on passenger side shoulder area did not retract. I was held in by seat belt at waist area. upper body thrown forward. & then back.</u>			
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.			