

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 241

Date Received

07-NOV-2000

 Od_or _____
 Rt_dt _____
 od_rt _____
 up_ltr _____

Reference No.

874532

 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) (located at front of windshield or drivers side) JT8UF11E4NO131695		Vehicle Make LEXUS	Vehicle Model LS400	Vehicle Year 1992	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 ☐ 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 _____					

FAILED COMPONENT(S)/PART(S) INFORMATION

Component 07463000	Part Name(s) POWER TRAIN:AXLE ASSEMBLY:BEARING:AXLE SHAFT	Location ☐ Left ☐ Right ☐ Front ☐ Rear	Failed Part(s) ☐ Original ☐ Replacement
No of Failures	Date(s) of Failure(s) 24-APR-1996 Mileage at Failure(s) 64685 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	Number of Fatalities	Estimated Property Damage	Reported to Police ☐ Yes ☒ No
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NARRATIVE DESCRIPTION OF FAILURE(S), INCIDENT(S), INJURY(IES)

REOCCURRING PROBLEM WITH FRONT WHEEL BEARING NEEDS REPLACEMENT, FIRST REPLACEMENT DONE AT 34,047 MILES, NOW AT 64,685 MILES PROBLEM REOCCURRED. DEALER NOTIFIED AND MADE REPAIRS AGAIN AT CONSUMER'S COST. HAD NO RESPONSE ABOUT PROBLEM. PLEASE FEEL FREE TO PROVIDE ANY FURTHER DETAILS. *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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Date Received

DEC -6 AM 9:37

07-NOV-2000

OFFICE

DEFECTS INVESTIGATION

Od. or

ri_d1

od_rt

up_tr

Reference No.

874532

OWNER INFORMATION (Type or Print)

653829

Work Number

Hor

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

Date 11/28/00

VEHICLE INFORMATION

Vehicle Ident. No. (VIN) (Located at bottom of windshield on driver's side)

JT8UF11E4NO131695

Vehicle Make

LEXUS

Vehicle Model

LS400

Vehicle Year

1992

Current Odometer Reading

64685

Purchase Date

5-31-95

Dealer's Name LEXUS OF SMITHTOWN

Engine Size
(CID/CC/L)☐ Turbo
☐ Diesel
☐ Gas

No Cylinders 8

☒ Fuel Injection☐ New ☒ Used

City ST. JAMES State NY Zip Code 11780

Transmission Type

☐ Manual☒ Automatic

Antilock Brakes

☒ Yes☐ No

Restraint System

☒ 3-Point Belt☐ Motorbelt☒ Driverside Airbag☐ 2-Point Belt☐ Passengerside Airbag

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☐ Other

FAILED COMPONENT(S)/PART(S) INFORMATION

Component

07483008

Part Name(s)

POWER TRAIN:AXLE ASSEMBLY:BEARING:AXLE SHAFT

Location

☒ Left☐ Right☒ Front☐ Rear

Failed Part(s)

☐ Original☒ Replacement

No of Failures

2

Date(s) of Failure(s) 24-APR-1996

Mileage at Failure(s) 64685

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

Number of Fatalities

Estimated Property Damage

Reporting to NHTSA

☐ Yes ☒ No

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

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CAR WAS PURCHASED WITH 38955 MILES

CONTINUE ON BACK IF NEEDED

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PAGE 1 OF 1

DATE 10/30/00

TIME 16:27

JOB #

NO. 122625

72 LEXUS ES400
 VIN: JTEUP11E4N0191695
 QGFI: 5/29/92
 MILES IN/OUT: 64079/100000
 DATE IN-OUT: 10/30/00-10/30/00
 LICENSE: 1
 5701 ANDREW JONES

CONDITION 01 - CUSTOMER PAY

OPERATION C INSTRUCTION

PRIME ITEM CUSTOMER REPORTS NOISE WHEN
 DRIVING AT 45 MPH

404021 CHECK FRONT LEFT FRONT HUB
 AND BEARING NOISE
 REPLACE HUB AND BEARING ASSY

TECH AMOUNT

PART NUMBER	DESCRIPTION	QTY	NET	EXT NET
9031750000	GEAR TYPE C OIL	2	11.00	22.00
909386300677	BEARING BALL 35/27,X	1	25.50	25.50
9017924000	HUB	1	4.50	4.50
	CUST MECH LABR-LEXUS			270.00
	P&A RD CUST MECH-LEX			122.03
	SALES TAX			32.34
	CONDOZION TOTAL			424.87

CONDITION 02 - CUSTOMER PAY

OPERATION C INSTRUCTION

PRIME ITEM LEND IT NEEDED
 LEND A COURTESY LOANER/RENTAL CAR HAS
 BEEN RESERVED FOR YOU FOR YOUR
 DAY OF SERVICE ONLY.
 \$49.95 PER DAY FEE W/O 1ST DAY.
 ADDITIONAL FEE IF NOT RETURNED
 \$49.95 PER DAY X _____ DAYS = \$
 CHARGES WILL BE APPLIED TO YOUR
 BILL IF THE ADDITIONAL DAYS ARE
 NOT AUTHORIZED BY LEXUS OF SMITH
 TOWN'S SERVICE REPRESENTATIVE.

TECH AMOUNT

dmic

TOTAL LABOR 270.00
 TOTAL PARTS 122.03
 TOTAL SALES TAX 32.34
 TOTAL AMOUNT DUE 424.37

DOCUMENT
216889

FOR RETAIL AND WHOLESALE PARTS ONLY. NO RETURNS ON ELECTRICAL ITEMS
 OR SPECIAL ORDER ITEMS. 20% HANDLING CHARGE ON ALL RETURNS. NO
 RETURNS OR REFUNDS AFTER 3 DAYS WITHOUT THIS INVOICE.

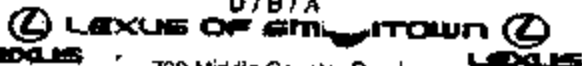
ALL PARTS INSTALLED ARE NEW UNLESS SPECIFIED OTHERWISE
 AS BEING USED OR REMANUFACTURED.

ADDITIONAL REPAIRS AUTHORIZED: WORKMANSHIP NOTICE AND ORAL APPROVAL OF
 AN INCREASE IN THE ORIGINAL ESTIMATED PRICE.

ESTIMATE \$ _____ TIME _____ PM ☐
 ADDITIONAL \$ _____ DATE _____
 TOTAL \$ _____ OYO _____

DATE PICKED UP _____ A DAILY STORAGE FEE OF \$25.00 PER DAY WILL BE
 CHARGED 48 HRS AFTER NOTIFICATION THAT WORK HAS
 BEEN COMPLETED. N.Y.S. REPAIR SHOP NUMBER
 EL 7048321

UNITED EXPRESS WARRANTY: LABOR AND PARTS ARE WARRANTED



700 Middle Country Road
Saint James, New York 11780
(516) 380-3200

***ALL SERVICE LABOR COMPUTED
BY FLAT RATE HOUR, AT A *
**LABOR RATE OF \$75.00 PER HR*
ALL SCHEDULED SERVICES *

PAM'S A SERVICE INVOICE

PAGE 1 OF 2

DATE 4/25/96

TIME 15:46

JOB #

RD #

56482

DE: JIM JENNISON

7 FREEZE HILL RD

VIN: JTBH11E4N0131695

DOF: 3/29/92

MILES IN/OUT: 34047/ 34050

DATE IN-OUT: 4/24/96- 4/25/96

LICENSE:

D/C: STEVE E. HUGHES

CONDITION 01 - WARRANTY

OPERATION C INSTRUCTION

PRIME ITEM

CK GRINDING NOISE ON L/TURNS

TECH

AMOUNT

4340H1

BEARING DISC BRAKE 1-SIDE RAR
LEFT SIDE

800

WARRANTY

WARRANTY

WARRANTY

PART NUMBER

DESCRIPTION

QTY

EXT NET

90031150008

BEARING, BAL, 35, 77, X

1

WARRANTY

9031150008

SEAL, BAL, 35, 77, X

1

WARRANTY

WARR MECH L

P&A WARR C

CONDITION

(CLAIM#

K2B5)

WARRANTY

WARRANTY

WARRANTY

CONDITION:

SE IN FRONT ON L/TURNS

CAUSE:

AXLE BEARING

REPAIR:

PLACED BEARING

CONDITION 02 - INTERNAL

OPERATION C INSTRUCTION

LORC

COURTESY L

TECH

AMOUNT

RESERVED

N/C

N/C

N/C

N/C

N/C

N/C

N/C

N/C

N/C

N/C

N/C

IF NOT RETURNED TO US BY THE DAY
OF COMPLETION A \$34.95 PER DAY
FEE WILL BE ADDED TO YOUR BILL.
(PLEASE, NO SMOKING IN OUR CARS.)

CONDITION 03 - INTERNAL

OPERATION C INSTRUCTION

PRIME ITEM

CHECK FOR A HEAVY SMELL FROM
EXHAUST ON ACCELERATION

TECH

AMOUNT

CHECKED AND FOUND NO ABNORMAL
SMELL AT THIS TIME. CHECKED

N/C

N/C

N/C

N/C

N/C

N/C

EMISSIONS AND FOUND ALL READING

91264

FOR RETAIL AND WHOLESALE PARTS ONLY. NO RETURNS ON ELECTRICAL
FEMS OR SPECIAL ORDER ITEMS. 20% HANDLING CHARGE ON ALL RETURNS.
NO RETURNS OR REFUNDS AFTER 3 DAYS WITHOUT THIS INVOICE.

ALL PARTS INSTALLED ARE NEW UNLESS SPECIFIED OTHERWISE
AS BEING USED OR REMANUFACTURED.

ADDITIONAL REPAIRS AUTHORIZED: I ACKNOWLEDGE NOTICE AND ORAL APPROVAL OF
AN INCREASE IN THE ORIGINAL ESTIMATED PRICE.

ESTIMATE \$ _____ TIME _____ PM/AM
ADDITIONAL \$ _____ DATE _____
TOTAL \$ _____ OK/NO

\$75.00 LABOR RATE PER F.R. HOUR

DATE PICKED UP

A DAILY STORAGE FEE OF \$25.00 PER DAY
WILL BE CHARGED 48 HRS. AFTER NOTIFICATION
THAT WORK HAS BEEN COMPLETED

N.Y.S. REPAIR SHOP NUMBER

R. 7048021

LIMITED EXPRESS WARRANTY: LABOR AND PARTS ARE WARRA

IMPORTANT
You will receive a LEXUS
SERVICE SURVEY in the next
few weeks. If for any reason you
cannot grade us "VERY
SATISFIED" or "DEFINITELY
RECOMMEND" please contact
Bob Martinez (Service Manager).
Thank You,
LEXUS OF SMITHTOWN
516-380-3200