



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 294

Date Received

21-FEB-2001

Od_or _____
R_dt _____
Pd_rt _____
Ip_ltr _____

Reference No.

880975

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) <small>(Located at bottom of windshield on driver's side)</small>	Vehicle Make	Vehicle Model	Vehicle Year	Current Odometer Reading		
JT9BS28G6X0202199	LEXUS	ES300	1999			
Purchase Date <input type="checkbox"/> New <input checked="" type="checkbox"/> Used	Dealer's Name _____ City _____ State _____ Zip Code _____	Engine Size (CID/CCL) _____ No. Cylinders _____	<input type="checkbox"/> Turbo <input type="checkbox"/> Diesel <input type="checkbox"/> Gas <input type="checkbox"/> Fuel Injection			
Transmission Type <input type="checkbox"/> Manual <input type="checkbox"/> Automatic	Antilock Brakes <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Restraint System <input type="checkbox"/> 3-Point Belt <input type="checkbox"/> Driverside Airbag <input type="checkbox"/> Passengerside Airbag <input type="checkbox"/> Motorbelt <input type="checkbox"/> 2-Point Belt	Cruise Control <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Drive Train <input type="checkbox"/> Front <input type="checkbox"/> Rear <input type="checkbox"/> 4-Wheel	Vehicle Type <input type="checkbox"/> Car <input type="checkbox"/> Van <input type="checkbox"/> Minivan <input type="checkbox"/> Other _____ <input type="checkbox"/> Sport Util Truck <input type="checkbox"/> Motorcycle	Body Style <input type="checkbox"/> 2-Door <input type="checkbox"/> 4-Door <input type="checkbox"/> Stationwagon <input type="checkbox"/> Pick Up Truck <input type="checkbox"/> Other _____

FAILED COMPONENT(S)/PART(S) INFORMATION

Component 06124000	Part Name(s) FUEL:FUEL EMISSION CONTROL:VALVE	Location <input type="checkbox"/> Left <input type="checkbox"/> Front <input type="checkbox"/> Right <input type="checkbox"/> Rear	Failed Part(s) <input type="checkbox"/> Original <input type="checkbox"/> Replacement
No. of Failures	Date(s) of Failure(s) Mileage at Failure(s) 23 Vehicle Speed at Failure(s)	Failed Part(s) Available? <input type="checkbox"/> Yes <input type="checkbox"/> No	NHTSA Previously Contacted? <input type="checkbox"/> Yes <input type="checkbox"/> 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 <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Fire <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Number of Persons Injured	Number of Fatalities	Estimated Property Damage	Reported to Police <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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NARRATIVE DESCRIPTION OF FAILURE(S), INCIDENT(S), INJURY(IES)

AT START UP AND ACCELERATION BLUE SMOKE COMES FROM TAIL PIPE. ALSO, THERE IS EXCESSIVE USE OF OIL, AND PCV VALVE IS CLOGGED UP. DEALER HAS INSPECTED VEHICLE, AND MANUFACTURER HAS BEEN NOTIFIED. *AK

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 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.

<p>DOT Auto Safety Hotline Vehicle Owner's Questionnaire (VOQ) NATIONWIDE 1-888-DASH-2-DOT 1-888-327-4236 www.nhtsa.dot.gov/hotline</p>	<p>FOR AGENCY USE ONLY 284</p> <p>Date Received: <u>21-FEB-2008</u></p> <p>Office: <u>ATLANTA</u></p> <p>Reference No.: <u>880975</u></p>
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OWNER INFORMATION (Type or Print)

Vehicle Identification Number: 675695

Do you authorize NHTSA to provide a copy of report to the manufacturer of your vehicle?
 In the absence of a signature, your name and address to the vehicle manufacturer. YES NO

Signature of Owner: _____ Date: 03/15/08

VEHICLE INFORMATION

Vehicle Ident. No. (VIN) <small>(Located at bottom of windshield on driver's side)</small> JT8BS28G6X0202109	Vehicle Make LEXUS	Vehicle Model ES300	Vehicle Year 1999	Current Odometer Reading 23,400		
Purchase Date <u>LEAS 0599</u>	Dealer's Name <u>FLOW LEXUS</u>		Engine Size (CID/GC/L) <u>6</u>	<input type="checkbox"/> Turbo <input type="checkbox"/> Diesel <input type="checkbox"/> Gas <input type="checkbox"/> Fuel Injection		
<input checked="" type="checkbox"/> New <input checked="" type="checkbox"/> Used	City <u>Kennesaw, GA</u> State <u>NC</u> Zip Code <u>27285</u>		No Cylinders <u>6</u>	<input type="checkbox"/> Turbo <input type="checkbox"/> Diesel <input type="checkbox"/> Gas <input type="checkbox"/> Fuel Injection		
Transmission Type <input type="checkbox"/> Manual <input checked="" type="checkbox"/> Automatic	Antilock Brakes <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Restraint System <input type="checkbox"/> 3-Point Belt <input type="checkbox"/> Motorbelt <input type="checkbox"/> Driverside Airbag <input type="checkbox"/> 2-Point Belt <input checked="" type="checkbox"/> Passengerside Airbag	Cruise Control <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Drive Train <input type="checkbox"/> Front <input type="checkbox"/> Rear <input type="checkbox"/> 4-Wheel	Vehicle Type <input checked="" type="checkbox"/> Car <input type="checkbox"/> Van <input type="checkbox"/> Minivan <input type="checkbox"/> Other <input type="checkbox"/> Sport Ult Truck <input type="checkbox"/> Motorcycle	Body Style <input type="checkbox"/> 2-Door <input checked="" type="checkbox"/> 4-Door <input type="checkbox"/> Stationwagon <input type="checkbox"/> Pick Up Truck <input type="checkbox"/> Other

FAILED COMPONENT(S)/PART(S) INFORMATION

Component 06126000	Part Name(s) FUEL:FUEL EMISSION CONTROL:VALVE <i>VALVE COVER GASKET Cylinder head</i>	Location <input type="checkbox"/> Left <input type="checkbox"/> Right <input type="checkbox"/> Front <input type="checkbox"/> Rear	Failed Part(s) <input checked="" type="checkbox"/> Original <input type="checkbox"/> Replacement
No of Failures	Date(s) of Failure(s) <u>09 or 10 2000</u> Mileage at Failure(s) <u>28,000 approx. 23,000</u> Vehicle Speed at Failure(s)	Failed Part(s) Available? <input type="checkbox"/> Yes <input type="checkbox"/> No	NHTSA Previously Contacted? <u>1st time 02/01</u> <input type="checkbox"/> Yes <input type="checkbox"/> 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 <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Fre <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Number of Persons Injured	Number of Fatalities	Estimated Property Damage	Reported to Police <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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Went to Arbitration Hearing during February 2008. Received an Unfavorable Decision. (Copy attached). Car continues to smoke upon start up and acceleration.

CONTINUE ON BACK IF NEEDED

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①



REASONS FOR DECISION

Customer: [Redacted] Case No.: LEX0050916

Manufacturer: Lexus Division

NOTE TO ARBITRATORS: Please put the reasons for your decision on this form.

Consumer's request for repairs has been denied due to the following:

- 1. Root cause comes from sludge buildup which could reasonably come from lack of proper service/maintenance.
2. By consumer's testimony, first oil change was at 10,500 miles.
3. Consumer's testimony regarding later oil changes - facts were inconsistent. For example, Lexus R/O #5090057 dated 10/09/00 shows mileage of 20,408. Oil change receipt from Muffler World dated 10/05/00 shows mileage of 21,609.
4. The testimony of consumer's witness, Joseph Krakpo (sp?), stated no oil in the oil filter upon inspection after consumer's visit to Lexus dealership on 10/09/00, indicating lack of oil or lack of circulation of oil which would cause the heat necessary to create sludge.
5. There was no evidence presented to substantiate a manufacturing defect. The condition of the vehicle today indicates that the oil pump is circulating oil through the filter.

Arbitrator(s): [Signatures] Date: 2/7/2001
Edward T. Query, Jr.
Michael Williams
Gerald M. Inhofer
Date: 2/7/01
Date: 2/07/01

(2)

NOTE: O.I was changed
@ 5000 miles but
was unable to get a
receipt due to change
in Dealer's computer.



031601

Item #2 of the attached decision is
misrepresented. If I stated 10,500
was my first oil change, that was incorrect.
The 1st oil change occurred @ approx.
3000 miles, as stated above.



031601

In reviewing my closing
notes, I stated in part,
"oil has been changed on
4 occasions"

NOTICE

In response to item # 3 of the Arbitration Decision, the owner of Muffler World has stated that s/he is willing to inform anyone (orally or in writing) that I came in for an oil change. On the date I requested a copy of the receipt, (could not locate my original) the owner/manager asked me for an approximation of the date at the time the oil was changed and I provided an approximation to the manager. I would never intentionally provide false and/or misleading information in a matter of official interest.

0315201

ESTIMATES FOR LABOR ONLY — MATERIAL ADDITIONAL

FORM RD-800

THE HYVALOIS & REYNOLDS CO., CLEVELAND, OHIO

LITHO IN U.S.A.

ROB'S AUTO REPAIR

NO 851

NAME: [REDACTED] DATE: 11-12-99

ADDRESS: [REDACTED] PHONE NO: [REDACTED]

SPEEDOMETER READING: 10485 SERIAL NO. [REDACTED]

OPER. NO. INSTRUCTIONS: [REDACTED] MOTOR NO. [REDACTED]

LUBRICATION: LUBR. OIL CHANGE TRANS. CHANGE DIFF. CHANGE WASH POLISH

(15) ASE Sealant 20.00

(15) Replace Rt Hand Axles 10.00

(15) Long Bushes

(15) RFL - Assembly front axle
shocks

Working in series console.

QUAN.	PART NO.	NAME OF PART	SALE AMOUNT	AMOUNT
		Oil	10.00	
		Bush	14.75	
		Bush	7.25	
		TOTAL PARTS	32.00	
		GALB. GAS @		
		QTS. OIL @		
		LBS. GREASE @		
		TOTAL GAS - OIL - GREASE		
		ACCESSORIES		
		AMOUNT		
		TOTAL LABOR		30.00
		TOTAL PARTS		32.00
		GAS, OIL, GREASE		
		ACCESSORIES		
		TIRES, TUBES		
		OUTSIDE WORK		
		TOTAL		62.00
		TAX		1.92
		TOTAL AMOUNT		63.92

WORK AUTHORIZED BY: X [REDACTED]

DELIVERED TO: [REDACTED]

DATE PROMISED: [REDACTED]
DATE DELIVERED: [REDACTED]

AN EXPRESS MECHANIC'S LIFE INSURANCE POLICY IS MAINTAINED BY THIS COMPANY

(5)



21609 10/25/00 37588 45.00

EZC3338	99	LEXUS/	E6300	SO-241	<i>Jmi</i>	(326) 854-1945
		900016		OC1		14.98
1.0	1	900016		OC # 2		7.00
		OC2				7.20

10.50 Hour
 1030 I have complete call log.
 I will call back & we will talk.
 I will call back of S. Johnston

MUFFLER WORLD
 3260 S HOLDEN RD
 GREENSBORO, NC 27407

(334) 275-4000 ←
(334) 254-8086 ←
254-8086 = FAX

21.98
 3.42
 22.40

7

010101

Luxury Sports Imports
Wilmington, NC

40

Owner
Roblin
Foreign & Domestic
722-0172

PCV valve clogged up

FEEL engine FEEL is leaking

PCV VALVE has oil in it

Problem is NOT caused by lack of oil change

(Job listed to work for Lexus) *

He will be happy to talk to anyone about this *

- ↳ Need to speak w/ Zone Mgr.
- ↳ Problem should be covered by warranty

Business (2nd attached)





LUXURY SPORTS & IMPORTS
ALL FOREIGN & DOMESTIC

ROB LINVILLE
OWNER/OPERATOR

722-0172

81

FOREIGN ACCENTS
5316 West Market Street
Greensboro, NC 27409
(336) 294-2137

Customer: [REDACTED]
 Address: [REDACTED]
 City, State: [REDACTED]
 Day Phone: [REDACTED]
 Night Phone: [REDACTED]
 Fax: [REDACTED]
 Estimate Ref: 1010
 Date: December 29, 2000
 Time: 09:37 AM

Service Writer: JK
 Service Tech:
 VID: 181831
 Mileage: 22,000

Vehicle: 1999 Lexus ES 300 V6-2995cc 3.0L DOHC MFI

Description	Part #/Labor Rate	Qty	Price/Time	Extended
2.50				
Replace (B)	Labor 60.00 / hr	1	19.84	1190.40
Includes: R&R Cylinder Head.				
Valve Seals				
Intake	9091302101	6	9.88	59.28
Exhaust	9091302111	6	9.88	59.28
Valve Cover Gasket				
Right	1121320030	1	22.58	22.58
Left	1121420030	1	22.58	22.58
Oil Filter				
Oil Filter	90915YZZB9	1	11.96	11.96
Replace	Labor 60.00 / hr	1	0.68	40.80
Note, To Change Oil, Add	Labor 60.00 / hr	1	0.14	8.40
castrol 20w50 oil		6	2.50	15.00
	Labor Total			1239.60
	Parts Total			190.68
	Sub-Total			1430.28
	Parts Tax	6.0%		11.44
	Total			\$ 1441.72

We " fix it right the first time " with ALLDATA!

We appreciate your business !

Signature _____

Date _____

estimate



**ERIC JONES
FOREIGN AUTO REPAIR**

511 South Eugene Street
GREENSBORO NC 27406
(336) 574-0966

B2

NAME: [REDACTED]		DATE: 12-28-02	
STREET: [REDACTED]		[REDACTED]	
YEAR: 99	COLOR: [REDACTED]	MAKE: Lexus	MODEL: LS300
REGISTRATION NO:	SERIAL NO:	ODOMETER:	ESTIMATE PREPARED BY:
INSURANCE CO:		ADJUTOR:	

REPLACE	REPAIR	DESCRIPTION	PARTS	LABOR	REFINISH	SUBLET
		oil	30			
		Filter	18			
		put cleaners in - drain - put air in, drain etc				
		will need to keep car for 3 days				
		has to be half engine. This should be covered in warranty				
TOTALS						450

The above is an estimate based on our inspection and does not cover any additional parts or labor which may be required after the work has been started. Occasionally, worn or damaged parts are discovered which may not be evident on the first inspection. Because of this, the above prices are not guaranteed. Quotations on parts and labor are current and subject to change.

AUTHORIZATION FOR REPAIR. You are hereby authorized to make the above repairs:

SIGNED: _____

DATE: _____

TOTAL PARTS	\$ _____
TOTAL LABOR	\$ _____
TOTAL REFINISH	\$ _____
TOTAL SUBLET	\$ _____
TAX	\$ _____
TOTAL	\$ _____

(10)

PLEASE PRINT

Name:

Address:

City:

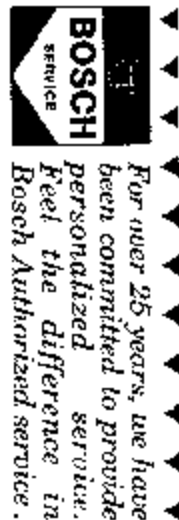
Phone:

Make: LEXUS Model: ES 300 Year: 99

Color: White Mileage: 22945 Date: 12/29/00

Foreign Accents

INTERNATIONAL AUTOMOTIVE SERVICE - PARTS - ACCESSORIES



Repair Order Number: _____

No 181831

Refer to R.O. Number: _____

Your Technician: _____

5316 West Market Street • Greensboro, NC 27409 • 336-294-2137

See reverse side for limited warranty. I certify that I have read the warranty on the reverse, and that I have been provided a copy thereof.

Signature: _____

YOUR TECHNICIAN'S COMMENTS

check for excessive smoke from tailpipe using oil excessive
This car has 22,945 miles has had oil changed every 5000 miles according to some records card customer -
Most likely expansion is due seal problem or ring problem - both of which should be covered by Factory warranty by Lexus Dealer
* Return to Dealer for Repairs under warranty

TIME	SERVICE PERFORMED	PRICE
	check for excessive smoke from tailpipe using oil excessive	
	This car has 22,945 miles has had oil changed every 5000 miles according to some records card customer -	
	Most likely expansion is due seal problem or ring problem - both of which should be covered by Factory warranty by Lexus Dealer	
	* Return to Dealer for Repairs under warranty	
	TOTAL	

QTY	PARTS & ACCESSORIES	PRICE
	All Parts New Unless Specified Otherwise	
	TOTAL	

QTY	FLUIDS & LUBES	PRICE		
	Oil	3110	Parts	
	Gear Lube	3112	Outside Repair	
	ATF	3114	Towing	
	Antifreeze	3116	Fluids	
	Windshield Washer	3118	Shop Supplies	
	Brake Fluid	3120	Network	
	Power/B134	3122	Belts	1.50
	Gasoline	5345	Ins. Palm.	
	Grease	3113	Freight	
		5245	E.P.A.	
		2132	Tax	
	TOTAL		TOTAL	181831

TOWING PRICE

Date Payment Received: / /

Cash Check #

Credit Card #

State Driver's License

12.6K of oil changes.

Document found during BBB Hearing

4

Since I've had this vehicle, I've had the oil changed ~~in~~ A consistent manner. Like every 5000 miles, or so.

Exhibit C - Oil changes

C1 - 11-12-99

C2 040500

C3 100500

NOTE: Ms. Robinson of the paper world ^{couldn't} acknowledged that she remembers me coming in for an oil change on another occasion too. They went to a computer, ^{that} she was unable to retrieve the other document. She did provide a card with her name, phone #, etc. She stated she will gladly talk to anyone about this matter. The card is attached to Exhibit C3.

~~During~~ ^{later part of} December 2000:

I spoke of Jonathan ^{last name unknown} ^{Told him I had under 25 payments.}

^{Told him I had under 25 payments.}

Jonathan advised he had, in K. will. I spoke w/ Lexus rep. Therefore, Jonathan advised me he has to rely on Lexus diagnosis, even if I had new information from other independent doctors.

Per Jonathan, "I do all of your receipts, this is Lexus final decision."



NOTICE!!

I firmly believe Lexus should repair this 1999 vehicle, free of charge. I have not been negligent in the upkeep of this vehicle. This vehicle is still under warranty too. Can this not be considered deceptive trade practices???

This is the second Lexus vehicle that I have leased and I did so in a good faith effort. The poor customer service I have received in the processing of this matter has been totally unacceptable. I'm currently (2nd time) paying \$500 a month for a vehicle that I have limited use of.

I respectfully request a fair, impartial investigation of this matter.

Thank you.

[Redacted Signature]
03/15/01

(74)