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	920
Date Received: 16-MAY-2001	Od_or ____ ____ rt_dt ____ ____ od_rt ____ ____ np_ltr ____ ____
	Reference No.: 888353

[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
JTEGH20V610017543	TOYOTA TRUCK	RAV4	2001	

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
12250000	INTERIOR SYSTEMS:ACTIVE RESTRAINTS:BELT BUCKLES	☐ Left ☐ Right ☐ Front ☐ Rear	☐ Original ☐ Replacement

No of Failure	Date(s) of Failure(s)	Failed Part(s)	NHTSA Previously
	11-MAY-2001 4500 Mileage at Failure(s)_____	☐ 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 Fatalitie	Estimated Property Damag	Reported to Polic
☒ Yes ☐ No	☐ Yes ☒ No	1	0		☒ Yes ☐ No

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

WHILE TRAVELING AT APPROXIMATELY 50 MPH ANOTHER VEHICLE CROSSED INTO CONSUMER'S PATH WHICH RESULTED IN FRONT END OF CONSUMER'S VEHICLE COLLIDING WITH OTHER VEHICLE. PASSENGER'S SEAT BELT FAILED TO REMAIN LOCKED INTO BUCKLE, WHICH ALLOWED RESTRAINT BELT TO COME LOOSE. PASSENGER WAS THROWN AGAINST REAR VIEW MIRROR AS A RESULT OF RESTRAINT BELT RELEASING. PLEASE PROVIDE ANY ADDITIONAL INFORMATION/ATTACHMENTS.*AK

CONTINUE ON A SEPARATE SHEET

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.