



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 1220

Date Received

20-NOV-2001

Od_or _____
rt_dt _____
pd_rt _____
rp_lr _____

Reference No.

899323

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
JT3YR26W8G5025813		TOYOTA TRUCK	VAN	1986	
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	☐ Yes ☒ No	☐ Front ☐ Rear ☐ 4-Wheel	☐ Car ☒ Van ☐ Minivan ☐ Other
		☐ Motorbelt ☐ 2-Point Bel			☐ Sport Util ☐ Truck ☐ Motorcycle ☐ Other
					Body Style
					☐ 2-Door ☐ 4-Door ☐ Stationwagon ☐ Pick Up Truck ☐ Other

FAILED COMPONENT(S)/PART(S) INFORMATION

Component 08210000	Part Name(s) ELECTRICAL SYSTEM:WIRING:HARNES:FRONT:UNDERHOOD	Location ☐ Left ☐ Right ☐ Front ☐ Rear	Failed Part(s) ☐ Original ☐ Replacement
No of Failure	Dates of Failure(s) _____ Mileage at Failure(s) 152000 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)

WHILE DRIVING A FIRE IGNITED IN ENGINE COMPARTMENT, CAUSE HAS NOT YET BEEN DETERMINED.
PLEASE PROVIDE ANY FURTHER INFORMATION. *AK

COPIES OF REPORTS ARE KEPT

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.

DOT Auto Safety Hotline Vehicle Owner's Questionnaire (VOQ) NATIONALWIDE 1-888-DASH-2-DOT 1-888-327-4236 www.nhtsa.dot.gov/hotline		FOR AGENCY USE ONLY 1220 Date Received: 1-NOV-2001 Reference No.: 699323	
U.S. Department of Transportation National Highway Traffic Safety Administration		Do you authorize NHTSA to provide a copy of report to the manufacturer of your vehicle? In the absence of _____ name and address to the vehicle manufacturer. Signature of Owner: _____ Date: 12/05/01	
OWNER INFORMATION (Type or Print)			
Vehicle Ident. No. (VIN) _____ (located at bottom of windshield or driver's door)		Vehicle Year: 1986 Current Odometer Reading: _____	
Vehicle Make: TOYOTA TRUCK Vehicle Model: VAN		Engine Size (CID/CC/L): N/A No. Cylinders: 4 ☐ Turbo ☐ Diesel ☐ Gas ☒ Fuel Injection	
Purchase Date: _____ ☐ New ☒ Used		Dealer's Name: EDEN AUTOMOTIVE SALES City: EDEN State: VT Zip Code: 05652	
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 ☐ Sport Utl ☐ Truck ☐ Motorcycle ☐ Minivan ☐ Other _____	
Body Style: ☐ 2-Door ☐ 4-Door ☐ Stationwagon ☐ Pick Up ☒ Truck		FAILED COMPONENT(S)/PART(S) INFORMATION	
Component: 08310000 Part Name(s): ELECTRICAL SYSTEM: WIRING: HARNESS: FRONT: UNDERHOOD		Location: ☐ Left ☐ Right ☐ Front ☐ Rear Failed Part(s): ☐ Original ☐ Replacement	
No. of Failures: _____ Date(s) of Failure(s): _____ Mileage at Failure(s): 152000 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: 1 Number of Fatalities: _____ Estimated Property Damage: 50 thousand Reported to Police: ☒ Yes ☐ No	

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

WHILE DRIVING A FIRE IGNITED IN ENGINE COMPARTMENT, CAUSE HAS NOT YET BEEN DETERMINED. PLEASE PROVIDE ANY FURTHER INFORMATION. *AK

Veh WAS PARKED FIRE N/A. WAS PARKED APPROX 45 MINUTES

CONTINUE ON BACK IF NEEDED

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**THE FOLLOWING PAGES ARE WITHHELD TO
PROTECT UNWARRANTED INVASION OF
PERSONAL PRIVACY PURSUANT TO
EXEMPTION 6 OF THE FREEDOM OF
INFORMATION ACT, 5 U.S.C. 552(b)(6)**

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