



U.S. Department
of Transportation
**National Highway
Traffic Safety
Administration**

Auto Safety Hotline

Vehicle Owner's Questionnaire

NATIONWIDE 1-800-424-8393

DC METRO AREA (202) 366-0123

INTERNET: <http://www.nhtsa.dot.gov>

Use a No. 2 pencil or a blue
or black ink pen only.

CORRECT MARK:

FOR AGENCY USE ONLY

Date Received

Reference No.

On-air

n-rt

ad-t

up-lr

OWNER INFORMATION (Type or Print)

DAYTIME TELEPHONE NUMBER

VEHICLE INFORMATION

VEHICLE IDENT. NO. (VIN) (Locate at bottom of windshield on driver's side)		VEHICLE MAKE	VEHICLE MODEL	MANUFACTURE DATE	MODEL YEAR
4TANWZ2N8Y2626038		TOYOTA	TACOMA		
VEHICLE MANUFACTURER					
☐ BMW ☐ Ford ☐ Honda ☐ Nissan ☐ Subaru ☐ Volvo ☐ Other ☐ DaimlerChrysler ☐ General Motors ☐ Hyundai ☐ Saab ☒ Toyota ☐ VW					
PURCHASE DATE	☒ New ☐ Used	DEALER'S NAME	CITY	STATE	ZIP CODE
FEB 2000		Jerry's Toyota	BALTO	MD	
ENGINE SIZE	FUEL SYSTEM	FUEL TYPE	TRANSMISSION TYPE	ANTILOCK BRAKES	RESTRAINT SYSTEM
101D/CC/L3	☐ Turbo ☒ Fuel Injection	☐ Diesel ☒ Gas	☐ Manual ☒ Automatic	☒ Yes ☐ No	☒ Driverside Airbag ☐ 2-Point Belt ☒ Passengerside Airbag ☐ Motorbelt ☒ 3-Point Belt
NO. CYLINDERS					CRUISE CONTROL
6					☒ Yes ☐ No
DRIVETRAIN	VEHICLE TYPE			DOORS	BODY STYLE
☐ Front ☒ 4-Wheel ☐ Rear	☐ Car ☐ Minivan ☒ Truck ☐ Other ☐ Van ☐ Sport Utility ☐ Motorcycle			☒ 2-Door ☐ 4-Door	☐ Hatchback ☐ Sedan ☒ Pick Up Truck ☐ Stationwagon

FAILED COMPONENT(S)/PART(S) INFORMATION

COMPONENT ☐ Child Seat ☐ Electrical Lights & Alarms ☐ Engine & Charging System ☐ Equipment ☐ Fuel System, Exhaust ☐ Heater, Defrost, Ventilator ☐ Interior ☐ Parking Brake ☐ Power Train ☐ Service Brakes ☐ Steering ☐ Structure ☐ Suspension ☐ Visual Systems ☐ Other	NO. OF FAILURES	To report defective or failed tires provide the following: Tire Brand, Tire Name, Tire Size (include all number and letters).	
	INCIDENT DATE	TIRE NAME	COMPLETE TIRE SIZE
	MILEAGE AT INCIDENT	TIRE BRAND	
	VEHICLE SPEED AT INCIDENT		
FAILED PART(S) ☐ Original ☐ Replacement	FAILED PART(S) AVAILABLE? ☐ Yes ☐ No	NHTSA PREVIOUSLY CONTACTED? ☐ Yes ☐ No	

APPLICABLE INCIDENT INFORMATION

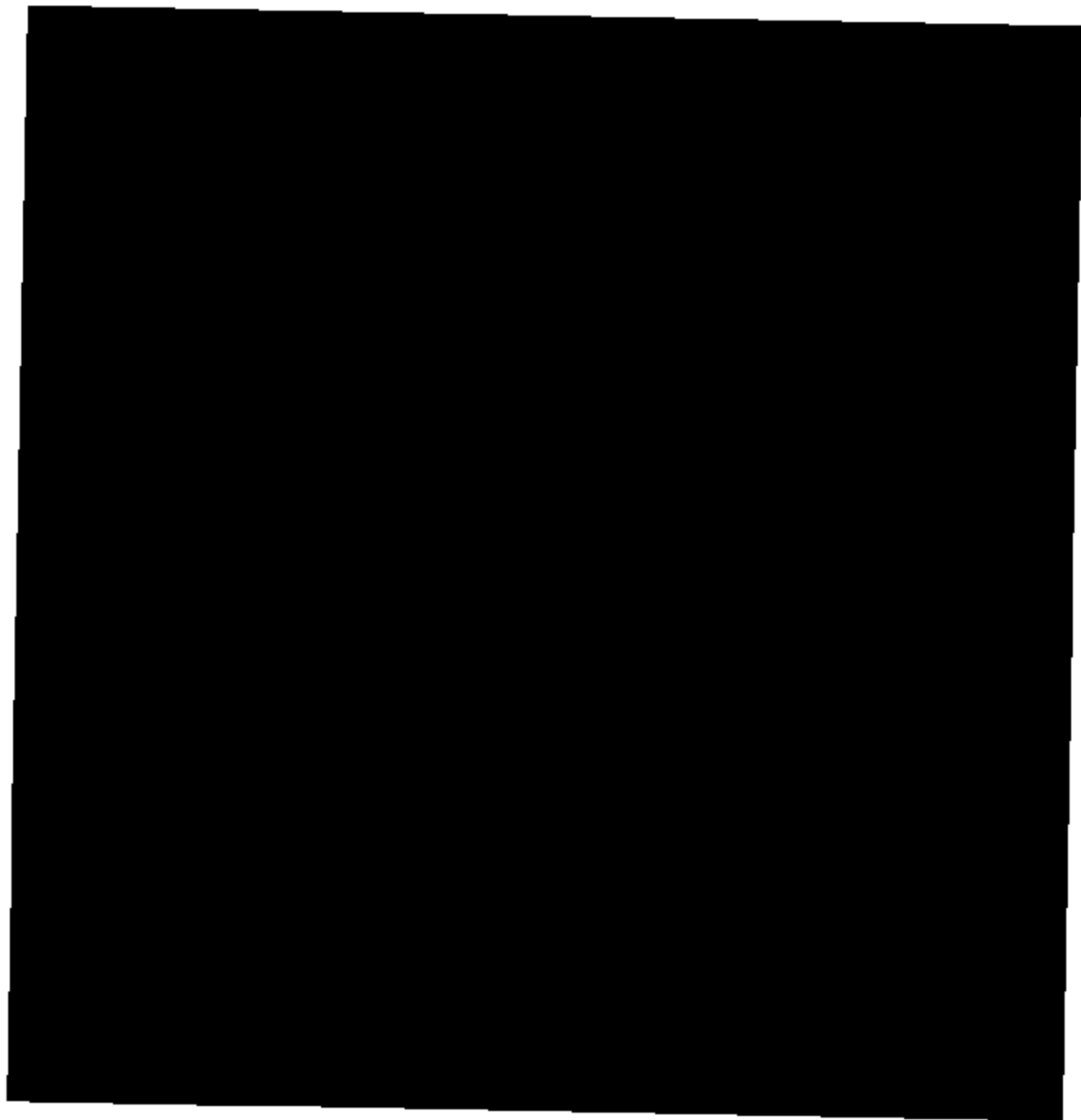
Please describe in detail the Incident(s), Failure(s), Crash(es), and Injury(ies) on the back of this form.	CRASH	NUMBER OF PERSONS INJURED	CAUSE OF INCIDENT	RESULT OF INCIDENT
	☐ Yes ☐ No	☐ 0 ☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5 ☐ 6 ☐ 7 ☐ 8 ☐ 9		
FIRE	NUMBER OF FATALITIES			
	☐ Yes ☐ No	☐ 0 ☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5 ☐ 6 ☐ 7 ☐ 8 ☐ 9	☐ Wear/Commodi/Rust ☐ Weak/Poor Fit/Loose ☐ Out/Torn ☐ Disconnected/Fell Off ☐ Erratic/Poor Performance ☐ Excessive Effort ☐ Nuisance ☐ Leaks ☐ Short ☐ Loose/Sticks/Cracks ☐ Stability/Vibration ☐ Broken	☐ Explosion/Fire ☐ Loss of Control ☐ Poor Visibility ☐ Inadvertent Start ☐ Roll over ☐ Stalls ☐ Sudden Acceleration

PLEASE DO NOT WRITE IN THIS AREA

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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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