Form Approved: O.M.B. No. 2127-0008

U.S. Department of Transportation

National Highway Traffic Safety Administration

DOT Auto Safety Hotline

Vehicle Owner's Questionnaire

To Report Vehicle Safety Defects
1-888-DASH-2-DOT
(1-888-327-4236)
INTERNET:www.nhtsa.dot.gov/hotline

FOR AGENCY USE ONLY 100148

Date Received	Repository ☐
02-FEB-2007	Reference No. 10181411

OWNER INFORMATION (Type or Print)

Name [redacted]		Daytime Telephone Number [redacted]	E-mail Address [redacted]
Address [redacted]		Evening Telephone Number [redacted]	
City FORESTHILL	**State** CA	**Zip Code** [redacted]	

Do you authorize NHTSA to provide a copy of this report to the manufacturer of your vehicle? ☒ *YES* ☐ *NO*
In the absence of an authorization, NHTSA WILL NOT provide your name or address to the vehicle manufacturer.

Signature of Owner _____ Date ___/___/___

VEHICLE INFORMATION

17 digit Vehicle Identification Number Located at bottom of windshield on driver's side	Make	Model	Model Year
5TEUX42N87Z[redacted]	TOYOTA	TACOMA	2007

Date Purchased	Dealer's Name and Telephone Number			Engine:	Fuel Type:
22-OCT-06				No: Cylinders 4	Gas
Original Owner ☒	Dealer's City	State	Zip Code		

Transmission Type			Vehicle Component Code
	☐ Antilock Brakes ☒ Cruise Control	Powertrain 4 WHEEL DRIVE	180000 VEHICLE SPEED CONTROL Multiple Failure: 1

FAILED COMPONENT(S)/PART(S) INFORMATION

Incident Date(s)	Failure Mileage	Failure Speed
24-OCT-2006	1	50

ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A TIRE FAILURE

Tire Make	Tire Model (Name or Number)	Tire Size (Example P215/65R15)
DOT No. (Example: DOTMAL9ABC036)	☐ Original Equipment ☐ Prior Repair	Failure Location:
Tire Component Code		Tire Failure Type

ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A CHILD SEAT FAILURE

Make:	Date Manufactured:	Model No./Name:
Seat Type:	Installation System:	
Child Seat Component Code:	Failed Part:	

APPLICABLE INCIDENT INFORMATION

(Please describe in detail the incident(s), Failure(s), Crash(es), and injury(ies).)

Crash	Fire	Number of Persons Injured	Number of Deaths	Reported to Police
☐ Yes ☒ No	☐ Yes ☒ No			N

Narrative Description of Incident(S), Crash(es), and Injury(ies).
Please describe (1) events leading up to the failure, (2) failure and its consequences, and (3) what was done to correct the failure; i.e, parts repaired or replaced (and if old part is available).

AT HIGHWAY SPEEDS, THE THROTTLE STICKS OPEN CAUSING THE ENGINE TO CONTINUE AT HIGH RPM AND THE VEHICLE WON'T SLOW DOWN. IN HEAVY TRAFFIC, THERE IS GREAT SAFETY PROBLEM. *NM

Include, if available: Police/Fire Department Report, Photos, and Repair Invoice. ATTACH ADDITIONAL SHEETS IF NECESSARY

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.

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FOR AGENCY USE ONLY 100148

Date Received	Repository ☐
03-FEB-2007	Reference No. 10181486

OWNER INFORMATION (Type or Print)

Name [redacted]		Daytime Telephone Number [redacted]	E-mail Address [redacted]
Address [redacted]		Evening Telephone Number [redacted]	
City WEST NEWTON	**State** PA	**Zip Code** [redacted]	

Do you authorize NHTSA to provide a copy of this report to the manufacturer of your vehicle? ☒ *YES* ☐ *NO*
In the absence of an authorization, NHTSA WILL NOT provide your name or address to the vehicle manufacturer.

Signature of Owner _____ Date ___/___/___

VEHICLE INFORMATION

17 digit Vehicle Identification Number Located at bottom of windshield on driver's side	Make	Model	Model Year
5TELU42N17Z[redacted]	TOYOTA	TACOMA	2007

Date Purchased	Dealer's Name and Telephone Number			Engine:	Fuel Type:
14-NOV-06	DAY TOYOTA 412-469-3000			No: Cylinders 6	Gas
Original Owner ☒	Dealer's City PLEASANT HILLS	State PA	Zip Code 15236		

Transmission Type			Vehicle Component Code
AUTOMATIC	☒ Antilock Brakes ☒ Cruise Control	Powertrain 4 WHEEL DRIVE	072000 FUEL SYSTEM, GASOLINE:DELIVERY Multiple Failure: 1

FAILED COMPONENT(S)/PART(S) INFORMATION

Incident Date(s)	Failure Mileage	Failure Speed
24-JAN-2007	2987	0

ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A TIRE FAILURE

Tire Make	Tire Model (Name or Number)	Tire Size (Example P215/65R15)
DOT No. (Example: DOTMAL9ABC036)	☐ Original Equipment ☐ Prior Repair	Failure Location:
Tire Component Code		Tire Failure Type

ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A CHILD SEAT FAILURE

Make:	Date Manufactured:	Model No./Name:
Seat Type:	Installation System:	
Child Seat Component Code:	Failed Part:	

APPLICABLE INCIDENT INFORMATION

(Please describe in detail the incident(s), Failure(s), Crash(es), and injury(ies).)

Crash	Fire	Number of Persons Injured	Number of Deaths	Reported to Police
☐ Yes ☒ No	☐ Yes ☒ No	0	0	N

Narrative Description of Incident(S), Crash(es), and Injury(ies).
Please describe (1) events leading up to the failure, (2) failure and its consequences, and (3) what was done to correct the failure; i.e, parts repaired or replaced (and if old part is available).

I WAS STOPPED WAITING FOR ONCOMING TRAFFIC AT RT. 136 WEST NEWTON PA. WITH MY FOOT ON THE BRAKE THE TRUCK ACCELERATED SO HARD THE BRAKE WOULD NOT HOLD IT EVEN WITH FULL PRESSURE APPLIED. THE ONCOMING CAR MISSED ME BY INCHES. AFTER TRYING TO GET TOYOTA TO TAKE CARE OF IT WITH NO LUCK, I TRADED THE TRUCK IN WITH ONLY 3000 MILES ON IT. I AM VERY CONCERNED THAT THE TRUCK WILL BE SOLD TO SOMEONE THAT MAY HAVE THE SAME PROBLEM AND NOT BE AS FORTUNATE AS I WAS. *JB SEE ALSO 10180652 *DSY

Include, if available: Police/Fire Department Report, Photos, and Repair Invoice. ATTACH ADDITIONAL SHEETS IF NECESSARY

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FOR AGENCY USE ONLY 100148

Date Received	Repository ☐
08-FEB-2007	Reference No. 10182045

OWNER INFORMATION (Type or Print)

Name [redacted]		Daytime Telephone Number [redacted]	E-mail Address [redacted]
Address [redacted]			
City COQUITLAM	**State** 00	**Zip Code** [redacted]	Evening Telephone Number [redacted]

Do you authorize NHTSA to provide a copy of this report to the manufacturer of your vehicle? ☒ *YES* ☐ *NO*
In the absence of an authorization, NHTSA WILL NOT provide your name or address to the vehicle manufacturer.
Signature of Owner _____ Date ___/___/___

VEHICLE INFORMATION

17 digit Vehicle Identification Number Located at bottom of windshield on driver's side	Make	Model	Model Year
5TELU42N47Z[redacted]	TOYOTA	TACOMA	2007

Date Purchased	Dealer's Name and Telephone Number			Engine:	Fuel Type:
03-NOV-06	REGENCY TOYOTA			No: Cylinders 6	Gas
Original Owner ☒	Dealer's City BURNABY, CANADA	State 00	Zip Code		

Transmission Type			Vehicle Component Code
MANUAL	☒ Antilock Brakes ☒ Cruise Control	Powertrain 4 WHEEL DRIVE	980000 OTHER Multiple Failure: 1

FAILED COMPONENT(S)/PART(S) INFORMATION

Incident Date(s)	Failure Mileage	Failure Speed
03-JAN-2007	2900	50

ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A TIRE FAILURE

Tire Make	Tire Model (Name or Number)	Tire Size (Example P215/65R15)
DOT No. (Example: DOTMAL9ABC036)	☐ Original Equipment ☐ Prior Repair	Failure Location:
Tire Component Code		Tire Failure Type

ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A CHILD SEAT FAILURE

Make:	Date Manufactured:	Model No./Name:
Seat Type:	Installation System:	
Child Seat Component Code:	Failed Part:	

APPLICABLE INCIDENT INFORMATION
(Please describe in detail the incident(s), Failure(s), Crash(es), and injury(ies).)

Crash	Fire	Number of Persons Injured	Number of Deaths	Reported to Police
☐ Yes ☒ No	☐ Yes ☒ No			N

Narrative Description of Incident(S), Crash(es), and Injury(ies).
Please describe (1) events leading up to the failure, (2) failure and its consequences, and (3) what was done to correct the failure; i.e, parts repaired or replaced (and if old part is available).

I WAS DRIVING DOWN HILL ALONG ABOUT 50 KM/H. I NOTICED STOP LIGHTS AND CARS SPINNING AND SLIDING EVERYWHERE. I GENTLY TOOK MY FOOT OFF THE THROTTLE TO START ENGINE BRAKING AND AS USUAL NOTHING HAPPENS IMMEDIATELY. WORSE, TRUCK STARTED TO ACCELERATE BECAUSE OF RPM HANG PROBLEM ON EVERY MANUAL TRANSMISSION EQUIPPED MODEL (MY COMPLAINT TO DEALER WAS IGNORED TWICE). THIS IS NOT EXACTLY A PLACE WHERE YOU CAN PUSH THE BRAKES EVEN WITH ABS BECAUSE IT ALSO IS AN OFF SLOPE TURN.☐
INSTEAD OF SLOWING DOWN GRACEFULLY, THE RPM HANG ACTUALLY ACTS LIKE A CRUISE CONTROL. COMBINED WITH THE DOWNHILL AND THE RPM HANG I AM NOT DECELERATING AT ALL! SUDDENLY THE ECU FINALLY DECIDES TO CLOSE THE THROTTLE (FUEL CUT OFF). AT THIS POINT TRUCK TAIL OF MY TRUCK SLIDE TO THE RIGHT AND TO THE LEFT. ONLY MY 20 YEAR EXPERIENCE AND GOOD LUCK LET ME AVOID A FATAL ACCIDENT.☐
THE NON-LINEAR THROTTLE RESPONSE IS NOT SAFE. THIS IS JUST DANGEROUS HOW THE ECU IS PROGRAMMED!☐
MAYBE BECAUSE ONLY <10% OF ALL TRUCKS HAVE MANUAL TRANSMISSIONS TOYOTA DOESN'T WANT TO HEAR ABOUT IT.☐
TOYOTA MUST ISSUE ECU PATCH FOR MANUAL TRANSMISSION MODELS V6 TACOMA, FJ CRUISER TO ELIMINATE:☐

Include, if available: Police/Fire Department Report, Photos, and Repair Invoice. ATTACH ADDITIONAL SHEETS IF NECESSARY

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INTERNET:www.nhtsa.dot.gov/hotline

FOR AGENCY USE ONLY 100148

Date Received	Repository ☐
12-FEB-2007	Reference No. 10182412

OWNER INFORMATION (Type or Print)

Name [redacted]		Daytime Telephone Number [redacted]	E-mail Address [redacted]
Addres [redacted]		Evening Telephone Number	
City DELAND	**State** FL	**Zip Code** [redacted]	

Do you authorize NHTSA to provide a copy of this report to the manufacturer of your vehicle? ☒ *YES* ☐ *NO*
In the absence of an authorization, NHTSA WILL NOT provide your name or address to the vehicle manufacturer.
Signature of Owner _____ Date ___/___/___

VEHICLE INFORMATION

17 digit Vehicle Identification Number Located at bottom of windshield on driver's side	Make	Model	Model Year
5TEUU42N57Z[redacted]	TOYOTA	TACOMA	2007

Date Purchased	Dealer's Name and Telephone Number	Engine:	Fuel Type:
06-JAN-07	DELAND TOYOTA 386-734-2184	No: Cylinders 6	Gas

Original Owner	Dealer's City	State	Zip Code
☒	DELAND	FL	32720

Transmission Type		Powertrain	Vehicle Component Code
MANUAL	☒ Antilock Brakes ☒ Cruise Control	4 WHEEL DRIVE	181000 VEHICLE SPEED CONTROL:ACCELERATOR PEDAL Multiple Failure: 3

FAILED COMPONENT(S)/PART(S) INFORMATION

Incident Date(s)	Failure Mileage	Failure Speed
03-FEB-2007	2300	5

ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A TIRE FAILURE

Tire Make	Tire Model (Name or Number)	Tire Size (Example P215/65R15)
DOT No. (Example: DOTMAL9ABC036)	☐ Original Equipment ☐ Prior Repair	Failure Location:
Tire Component Code		Tire Failure Type

ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A CHILD SEAT FAILURE

Make:	Date Manufactured:	Model No./Name:
Seat Type:	Installation System:	
Child Seat Component Code:	Failed Part:	

APPLICABLE INCIDENT INFORMATION
(Please describe in detail the incident(s), Failure(s), Crash(es), and injury(ies).)

Crash	Fire	Number of Persons Injured	Number of Deaths	Reported to Police
☐ Yes ☒ No	☐ Yes ☒ No	0	0	N

Narrative Description of Incident(S), Crash(es), and Injury(ies).
Please describe (1) events leading up to the failure, (2) failure and its consequences, and (3) what was done to correct the failure; i.e, parts repaired or replaced (and if old part is available).

TL*- THE CONTACT WAS HAVING PROBLEMS WITH THE 2007 TOYOTA TACOMA, THE THROTTLE STICKS WHILE DRIVING AND TRYING TO STOP. THE TRUCK WILL NOT STOP, IT ACCELERATED AT ALL TIMES UNEXPECTEDLY. HE TOOK THE VEHICLE TO THE DEALER AND THEY TOLD HIM THAT THE COMPUTER WAS LEARNING HOW TO DRIVE, THAT THE FAILURE WAS NORMAL, AND THAT ALL TOYOTA VEHICLES WENT THROUGH THAT PROCESS. IT WAS TAKEN TO THE DEALER FOR REPAIRS AT LEAST THREE TIMES, AND THEY COULD NOT FIND THE CAUSE OF THE PROBLEM. JUST LAST WEEK HE WAS IN THE PARKING LOT DRIVING AT 5 MPH AND THE VEHICLE ACCELERATED UNEXPECTEDLY. THE CURRENT AND FAILURE MILEAGE WERE 2300 MILES.*AK☐
TOYOTA CLAIMED CLAIMED IT WAS NORMAL AND A PART OF THE EMISSIONS. ☐
UPDATED 03/19/07. *JB

Include, if available: Police/Fire Department Report, Photos, and Repair Invoice. ATTACH ADDITIONAL SHEETS IF NECESSARY

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FOR AGENCY USE ONLY 100148

Date Received	Repository ☐
19-FEB-2007	Reference No. 10182950

OWNER INFORMATION (Type or Print)

Name [redacted]		Daytime Telephone Number [redacted]	E-mail Address
Address [redacted]		Evening Telephone Number	
City POLAND	**State** OH	**Zip Code** [redacted]	

Do you authorize NHTSA to provide a copy of this report to the manufacturer of your vehicle? ☒ *YES* ☐ *NO*
In the absence of an authorization, NHTSA WILL NOT provide your name or address to the vehicle manufacturer.
Signature of Owner _____ Date ___/___/___

VEHICLE INFORMATION

17 digit Vehicle Identification Number Located at bottom of windshield on driver's side	Make	Model	Model Year
5TETU62N57Z[redacted]	TOYOTA	TACOMA	2007

Date Purchased	Dealer's Name and Telephone Number			Engine:	Fuel Type:
15-DEC-06				No: Cylinders 6	Gas
Original Owner ☒	Dealer's City	State	Zip Code		

Transmission Type		Powertrain	Vehicle Component Code
AUTOMATIC	☒ Antilock Brakes ☒ Cruise Control	REAR WHEEL DRIVE	103000 POWER TRAIN:AUTOMATIC TRANSMISSION Multiple Failure: 20

FAILED COMPONENT(S)/PART(S) INFORMATION

Incident Date(s)	Failure Mileage	Failure Speed	
15-DEC-2006	3		

ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A TIRE FAILURE

Tire Make	Tire Model (Name or Number)	Tire Size (Example P215/65R15)
DOT No. (Example: DOTMAL9ABC036)	☐ Original Equipment ☐ Prior Repair	Failure Location:
Tire Component Code		Tire Failure Type

ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A CHILD SEAT FAILURE

Make:	Date Manufactured:	Model No./Name:
Seat Type:	Installation System:	
Child Seat Component Code:	Failed Part:	

APPLICABLE INCIDENT INFORMATION
(Please describe in detail the incident(s), Failure(s), Crash(es), and injury(ies).)

Crash	Fire	Number of Persons Injured	Number of Deaths	Reported to Police
☐ Yes ☒ No	☐ Yes ☒ No	0	0	N

Narrative Description of Incident(S), Crash(es), and Injury(ies).
Please describe (1) events leading up to the failure, (2) failure and its consequences, and (3) what was done to correct the failure; i.e, parts repaired or replaced (and if old part is available).

VEHICLE HAS A EXTREME HIGH IDLE AND OR HIGH TRANSMISSION HEAD PRESSURE. VEHICLE ONLY INDICATES APPROX 600-700 IDLE RPM'S WARM, HOWEVER; WHEN LETTING OFF THE GAS VEHICLE WANTS TO LURCH AND TAKE OFF. VERY UNEASY IN STOP AND GO TRAFFIC, FEELS LIKE DRIVER IS ABOUT TO LOSS CONTROL AND STRIKE THE VEHICLE AHEAD. TOOK TO DEALER AND ADVISED THIS IS A NORMAL CONDITION. THIS WAS ALSO VERIFIED BY TESTING 2 OTHER LIKE VEHICLES(07/V6/AUTOMATIC) *JB

Include, if available: Police/Fire Department Report, Photos, and Repair Invoice. ATTACH ADDITIONAL SHEETS IF NECESSARY

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FOR AGENCY USE ONLY 100148

Date Received	Repository ☐
13-APR-2007	Reference No. 10187789

OWNER INFORMATION (Type or Print)

Name [redacted]		Daytime Telephone Number [redacted]	E-mail Address
Address [redacted]		Evening Telephone Number	
City ELK GROVE	**State** CA	**Zip Code** [redacted]	

Do you authorize NHTSA to provide a copy of this report to the manufacturer of your vehicle? ☒ *YES* ☐ *NO*
In the absence of an authorization, NHTSA WILL NOT provide your name or address to the vehicle manufacturer.
Signature of Owner _____ Date ___/___/___

VEHICLE INFORMATION

17 digit Vehicle Identification Number Located at bottom of windshield on driver's side	Make TOYOTA	Model TACOMA	Model Year 2007

Date Purchased	Dealer's Name and Telephone Number			Engine: No: Cylinders 6	Fuel Type: Gas
Original Owner ☒	Dealer's City	State	Zip Code		

Transmission Type		Powertrain	Vehicle Component Code
AUTOMATIC	☒ Antilock Brakes ☒ Cruise Control	4 WHEEL DRIVE	180000 VEHICLE SPEED CONTROL Multiple Failure: 5

FAILED COMPONENT(S)/PART(S) INFORMATION

Incident Date(s)	Failure Mileage	Failure Speed
12-APR-2007	100	0

ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A TIRE FAILURE

Tire Make	Tire Model (Name or Number)	Tire Size (Example P215/65R15)
DOT No. (Example: DOTMAL9ABC036)	☐ Original Equipment ☐ Prior Repair	Failure Location:
Tire Component Code		Tire Failure Type

ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A CHILD SEAT FAILURE

Make:	Date Manufactured:	Model No./Name:
Seat Type:	Installation System:	
Child Seat Component Code:	Failed Part:	

APPLICABLE INCIDENT INFORMATION
(Please describe in detail the incident(s), Failure(s), Crash(es), and injury(ies).)

Crash	Fire	Number of Persons Injured	Number of Deaths	Reported to Police
☐ Yes ☒ No	☐ Yes ☒ No	0	0	N

Narrative Description of Incident(S), Crash(es), and Injury(ies).
Please describe (1) events leading up to the failure, (2) failure and its consequences, and (3) what was done to correct the failure; i.e, parts repaired or replaced (and if old part is available).

THIS IS NOT A FAILURE, BUT SOMETHING I SEE AS A SAFETY ISSUE.. WHEN I AM STOPPING AT A STOP LIGHT/ STOP SIGN AND AM IN DRIV WITH THE AIR CONDITIONER (A/C) ON THE TRUCK WILL SURGE FORWARD AND I HAVE TO PUSH THE BRAKES DOWN HARDER. THIS ONLY HAPPENS WHEN THE A/C IS ON, AND SEEMS TO COME FROM THE INCREASE IN ENGINE RPMS WHEN THE COMPRESSOR KICKS ON. THIS IS VERY UNSAFE AND COULD CAUSE ME TO REAR END SOMEONE. *AK

Include, if available: Police/Fire Department Report, Photos, and Repair Invoice. ATTACH ADDITIONAL SHEETS IF NECESSARY

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Date Received	Repository ☐
15-APR-2007	Reference No. 10187884

OWNER INFORMATION (Type or Print)

Name [redacted]		Daytime Telephone Number [redacted]	E-mail Address [redacted]
Address [redacted]		Evening Telephone Number [redacted]	
City TAHLEQUAH	**State** OK	**Zip Code** [redacted]	

Do you authorize NHTSA to provide a copy of this report to the manufacturer of your vehicle? ☒ *YES* ☐ *NO*
In the absence of an authorization, NHTSA WILL NOT provide your name or address to the vehicle manufacturer.
Signature of Owner _____ Date ___/___/___

VEHICLE INFORMATION

17 digit Vehicle Identification Number Located at bottom of windshield on driver's side	Make	Model	Model Year
3TMJU62NX7M[redacted]	TOYOTA	TACOMA	2007

Date Purchased	Dealer's Name and Telephone Number			Engine:	Fuel Type:
21-FEB-07				No: Cylinders 6	Gas
Original Owner ☒	Dealer's City	State	Zip Code		

Transmission Type		Powertrain	Vehicle Component Code
AUTOMATIC	☒ Antilock Brakes ☒ Cruise Control	REAR WHEEL DRIVE	103000 POWER TRAIN:AUTOMATIC TRANSMISSION Multiple Failure: 1

FAILED COMPONENT(S)/PART(S) INFORMATION

Incident Date(s)	Failure Mileage	Failure Speed	
14-APR-2007		0	

ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A TIRE FAILURE

Tire Make	Tire Model (Name or Number)	Tire Size (Example P215/65R15)
DOT No. (Example: DOTMAL9ABC036)	☐ Original Equipment ☐ Prior Repair	Failure Location:
Tire Component Code		Tire Failure Type

ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A CHILD SEAT FAILURE

Make:	Date Manufactured:	Model No./Name:
Seat Type:	Installation System:	
Child Seat Component Code:	Failed Part:	

APPLICABLE INCIDENT INFORMATION
(Please describe in detail the incident(s), Failure(s), Crash(es), and injury(ies).)

Crash	Fire	Number of Persons Injured	Number of Deaths	Reported to Police
☐ Yes ☒ No	☐ Yes ☒ No			N

Narrative Description of Incident(S), Crash(es), and Injury(ies).
Please describe (1) events leading up to the failure, (2) failure and its consequences, and (3) what was done to correct the failure; i.e, parts repaired or replaced (and if old part is available).

I BOUGHT A 07 TOYOTA TACOMA DOUBLE CAB WITH AUTOMATIC TRANSMISSION IN FEBRUARY. I HAVE NOTICED ON MULTIPLE OCCASIONS THAT WHILE SITTING STOPPED,A/C OFF, RIGHT FOOT ON BRAKE, THE TRUCK SUDDENLY SURGED AGAINST THE BRAKES. I THINK IF I HAD NOT HAD FIRM PRESSURE ON THE BRAKE PEDAL THE TRUCK WOULD HAVE ACTUALLY MOVED FORWARD. I BECAME AWARE OF OTHER TACOMA OWNERS EXPERIENCING THIS ON THE INTERNET TOYOTA FORUMS. THE INCIDENT DATE BELOW IS JUST THE LAST TIME IT HAPPENED. *AK

Include, if available: Police/Fire Department Report, Photos, and Repair Invoice. ATTACH ADDITIONAL SHEETS IF NECESSARY

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.

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INTERNET:www.nhtsa.dot.gov/hotline

FOR AGENCY USE ONLY 100148

Date Received	Repository ☐
24-APR-2007	Reference No. 10188746

OWNER INFORMATION (Type or Print)

Name [redacted]		Daytime Telephone Number [redacted]	E-mail Address [redacted]
Address [redacted]		Evening Telephone Number [redacted]	
City BURNSVILLE	**State** MN	**Zip Code** [redacted]	

Do you authorize NHTSA to provide a copy of this report to the manufacturer of your vehicle? ☒ *YES* ☐ *NO*
In the absence of an authorization, NHTSA WILL NOT provide your name or address to the vehicle manufacturer.
Signature of Owner _____ Date ___/___/___

VEHICLE INFORMATION

17 digit Vehicle Identification Number Located at bottom of windshield on driver's side	Make	Model	Model Year
	TOYOTA	TACOMA	2007

Date Purchased	Dealer's Name and Telephone Number			Engine:	Fuel Type:
09-OCT-06				No: Cylinders 6	Gas
Original Owner ☒	Dealer's City	State	Zip Code		

Transmission Type			Vehicle Component Code
AUTOMATIC	☒ Antilock Brakes ☒ Cruise Control	Powertrain 4 WHEEL DRIVE	100000 POWER TRAIN Multiple Failure: 1

FAILED COMPONENT(S)/PART(S) INFORMATION

Incident Date(s)	Failure Mileage	Failure Speed	
01-NOV-2006			

ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A TIRE FAILURE

Tire Make	Tire Model (Name or Number)	Tire Size (Example P215/65R15)
DOT No. (Example: DOTMAL9ABC036)	☐ Original Equipment ☐ Prior Repair	Failure Location:
Tire Component Code		Tire Failure Type

ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A CHILD SEAT FAILURE

Make:	Date Manufactured:	Model No./Name:
Seat Type:	Installation System:	
Child Seat Component Code:	Failed Part:	

APPLICABLE INCIDENT INFORMATION
(Please describe in detail the incident(s), Failure(s), Crash(es), and injury(ies).)

Crash	Fire	Number of Persons Injured	Number of Deaths	Reported to Police
☐ Yes ☒ No	☐ Yes ☒ No	0	0	N

Narrative Description of Incident(S), Crash(es), and Injury(ies).
Please describe (1) events leading up to the failure, (2) failure and its consequences, and (3) what was done to correct the failure; i.e, parts repaired or replaced (and if old part is available).

2007 TOYOTA TACOMA DOUBLE CAB OFFROAD 4X4 . VEHICLE SURGES (RPM INCREASES 200-300 RPM)WHEN IN GEAR AT A STOP. DOESN'T MATTER IF AC IS ON OR OFF. THIS HAS CAUSED NUMEROUS NEAR ACCIDENTS WITH VEHICLES IN FRONT OF ME, MY GARAGE DOOR AND THE WORK BENCH IN MY GARAGE. VEHICLE IDLES EXTREMELY FAST (1500 RPM) WHEN COLD WHICH IS DANGEROUS ON SLIPPERY ROADS AND HAS CAUSED ME TO SLIDE THROUGH STOP SIGNS. VEHICLE IDLES ROUGH, DOESN'T MATTER IF AC IS ON OR OFF. VEHICLE HAS A HARSH STUTTER SHIFT BETWEEN 1ST AND 2ND. VEHICLE HAS A VERY NOTICEABLE VIBRATION AT SPEEDS BETWEEN 15 AND 25 MPH. THIS VIBRATION OCCURS WHEN ACCELERATING, DRIVING AT A CONSTANT SPEED OR DECELERATING. THE VIBRATION OCCURS WHETHER BRAKING OR NOT. THE VEHICLE FEELS LIKE IT IS ENGINE BRAKING WHEN LETTING UP ON THE ACCELERATOR. THIS IS MOST NOTICEABLE AT SPEEDS 40 MPH OR SLOWER. IT IS A SAFETY HAZARD ON ICY ROADS. ALL THESE PROBLEMS BEGAN AFTER THE VEHICLE HAD 500 MILES ON IT. THE DEALER WAS MADE AWARE OF THESE ISSUES AND TEST DROVE THE VEHICLE. THE DEALER SAID THEY COULD NOT DETECT ANY OF THE PROBLEMS. ALSO, THE ORIGINAL EQUIPMENT TIRES ARE TERRIBLE IN SNOW. *JB

Include, if available: Police/Fire Department Report, Photos, and Repair Invoice. ATTACH ADDITIONAL SHEETS IF NECESSARY

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Form Approved: O.M.B. No. 2127-0008

U.S. Department of Transportation

National Highway Traffic Safety Administration

DOT Auto Safety Hotline

Vehicle Owner's Questionnaire

To Report Vehicle Safety Defects
1-888-DASH-2-DOT
(1-888-327-4236)
INTERNET:www.nhtsa.dot.gov/hotline

FOR AGENCY USE ONLY 100148

Date Received	Repository ☐
18-MAY-2007	Reference No. 10191171

OWNER INFORMATION (Type or Print)

Name [redacted]		Daytime Telephone Number [redacted]	E-mail Address
Address [redacted]		Evening Telephone Number	
City EXCELLO	**State** MO	**Zip Code** [redacted]	

Do you authorize NHTSA to provide a copy of this report to the manufacturer of your vehicle? ☒ *YES* ☐ *NO*
In the absence of an authorization, NHTSA WILL NOT provide your name or address to the vehicle manufacturer.
Signature of Owner _____ Date ___/___/___

VEHICLE INFORMATION

17 digit Vehicle Identification Number Located at bottom of windshield on driver's side	Make	Model	Model Year
5TETX22N07Z [redacted]	TOYOTA	TACOMA	2007

Date Purchased	Dealer's Name and Telephone Number			Engine:	Fuel Type:
27-FEB-07				No: Cylinders 4	Gas
Original Owner ☒	Dealer's City	State	Zip Code		

Transmission Type		Powertrain	Vehicle Component Code
AUTOMATIC	☒ Antilock Brakes ☒ Cruise Control	REAR WHEEL DRIVE	185000 VEHICLE SPEED CONTROL:CRUISE CONTROL Multiple Failure: 1

FAILED COMPONENT(S)/PART(S) INFORMATION

Incident Date(s)	Failure Mileage	Failure Speed
30-APR-2007	1900	60

ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A TIRE FAILURE

Tire Make	Tire Model (Name or Number)	Tire Size (Example P215/65R15)
DOT No. (Example: DOTMAL9ABC036)	☐ Original Equipment ☐ Prior Repair	Failure Location:
Tire Component Code		Tire Failure Type

ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A CHILD SEAT FAILURE

Make:	Date Manufactured:	Model No./Name:
Seat Type:	Installation System:	
Child Seat Component Code:	Failed Part:	

APPLICABLE INCIDENT INFORMATION
(Please describe in detail the incident(s), Failure(s), Crash(es), and injury(ies).)

Crash	Fire	Number of Persons Injured	Number of Deaths	Reported to Police
☐ Yes ☒ No	☐ Yes ☒ No	0	0	N

Narrative Description of Incident(S), Crash(es), and Injury(ies).
Please describe (1) events leading up to the failure, (2) failure and its consequences, and (3) what was done to correct the failure; i.e, parts repaired or replaced (and if old part is available).

TL*THE CONTACT OWNS A 2007 TOYOTA TACOMA. WHILE DRIVING DOWNHILL AT 60 MPH WITH THE CRUISE CONTROL ACTIVATED, THE VEHICLE WENT INTO OVERDRIVE AND ACCELERATED FORWARD WITHOUT WARNING. THE VEHICLE'S RPM ACCELERATED FROM TWO TO MORE THAN FIVE WITHIN SECONDS. THE DEALER STATED THAT THIS IS THE VEHICLE'S NORMAL OPERATION. THE CURRENT AND FAILURE MILEAGES WERE 1,900.

Include, if available: Police/Fire Department Report, Photos, and Repair Invoice. ATTACH ADDITIONAL SHEETS IF NECESSARY

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Form Approved: O.M.B. No. 2127-0008

U.S. Department of Transportation

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INTERNET:www.nhtsa.dot.gov/hotline

FOR AGENCY USE ONLY 100148

Date Received	Repository ☐
10-JUN-2007	Reference No. 10192866

OWNER INFORMATION (Type or Print)

Name [redacted]		Daytime Telephone Number [redacted]	E-mail Address [redacted]
Address [redacted]		Evening Telephone Number	
City OMAHA	**State** NE	**Zip Code** [redacted]	

Do you authorize NHTSA to provide a copy of this report to the manufacturer of your vehicle? ☒ *YES* ☐ *NO*
In the absence of an authorization, NHTSA WILL NOT provide your name or address to the vehicle manufacturer.

Signature of Owner _____ Date ___/___/___

VEHICLE INFORMATION

17 digit Vehicle Identification Number Located at bottom of windshield on driver's side	Make	Model	Model Year
5TEUU42N25Z[redacted]	TOYOTA	TACOMA	2007

Date Purchased	Dealer's Name and Telephone Number	Engine:	Fuel Type:
13-APR-05	OLD MILL TOYOTA 402-496-4444	No: Cylinders 6	Gas

Original Owner	Dealer's City	State	Zip Code
☒	OMAHA	NE	68154

Transmission Type		Powertrain	Vehicle Component Code
AUTOMATIC	☒ Antilock Brakes ☒ Cruise Control	4 WHEEL DRIVE	180000 VEHICLE SPEED CONTROL Multiple Failure: 1

FAILED COMPONENT(S)/PART(S) INFORMATION

Incident Date(s)	Failure Mileage	Failure Speed
30-MAY-2007	25000	20

ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A TIRE FAILURE

Tire Make	Tire Model (Name or Number)	Tire Size (Example P215/65R15)
DOT No. (Example: DOTMAL9ABC036)	☐ Original Equipment ☐ Prior Repair	Failure Location:
Tire Component Code		Tire Failure Type

ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A CHILD SEAT FAILURE

Make:	Date Manufactured:	Model No./Name:
Seat Type:	Installation System:	
Child Seat Component Code:	Failed Part:	

APPLICABLE INCIDENT INFORMATION
(Please describe in detail the incident(s), Failure(s), Crash(es), and injury(ies).)

Crash	Fire	Number of Persons Injured	Number of Deaths	Reported to Police
☒ Yes ☐ No	☐ Yes ☒ No	0	0	N

Narrative Description of Incident(S), Crash(es), and Injury(ies).
Please describe (1) events leading up to the failure, (2) failure and its consequences, and (3) what was done to correct the failure; i.e, parts repaired or replaced (and if old part is available).

MAY 30, I WAS PULLING INTO A PARKING SPACE AT KIEWIT MIDDLE SCHOOL WITH MY TACOMA. WHILE I WAS APPROXIMATELY 5-10 FEET FROM THE CAR IN FRONT THE ENGINE BEGIN RACING. MY FOOT WAS NOT ON THE ACCELERATOR, IT WAS FIRMLY ON THE BRAKE. THE ENGINE CONTINUED REVVING AND THE BRAKES FINAL GAVE AND I HIT THE CAR AHEAD.☐
☐
AS IT IS I DAMAGED THE FRONT OF MY TACOMA, AS WELL AS THE REAR OF CAR AHEAD OF ME.☐
☐
I AM SURE IF THERE WERE NOT A VEHICLE AHEAD AT SUCH A CLOSE DISTANCE GREAT DAMAGE AND INJURY WOULD HAVE BEEN INCURRED. I DO NOT FEEL THAT CURRENTLY THE VEHICLE IS SAFE TO DRIVE,☐
☐
☐
I CONTACTED TOYOTA, NATIONAL -- THEY TOLD ME THAT IT WAS OK AND TO TAKE IT HOME. I FELT SO STRONGLY THAT THE VEHICLE WAS NOT SAFE THAT I IMMEDIATELY TRADED IT IN FOR A NISSAN -- ☐

Include, if available: Police/Fire Department Report, Photos, and Repair Invoice. ATTACH ADDITIONAL SHEETS IF NECESSARY

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U.S. Department of Transportation

National Highway Traffic Safety Administration

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INTERNET:www.nhtsa.dot.gov/hotline

FOR AGENCY USE ONLY 100148

Date Received	Repository ☐
13-JUL-2007	Reference No. 10196327

OWNER INFORMATION (Type or Print)

Name [redacted]		Daytime Telephone Number [redacted]	E-mail Address [redacted]
Address [redacted]		Evening Telephone Number [redacted]	
City FLOWER MOUND	**State** TX	**Zip Code** [redacted]	

Do you authorize NHTSA to provide a copy of this report to the manufacturer of your vehicle? ☒ *YES* ☐ *NO*
In the absence of an authorization, NHTSA WILL NOT provide your name or address to the vehicle manufacturer.
Signature of Owner _____ Date ___/___/___

VEHICLE INFORMATION

17 digit Vehicle Identification Number Located at bottom of windshield on driver's side	Make	Model	Model Year
5TETU62N67Z[redacted]	TOYOTA	TACOMA	2007

Date Purchased	Dealer's Name and Telephone Number			Engine:	Fuel Type:
31-MAY-07	TOYOTA OF LEWISVILLE			No: Cylinders 6	Gas
Original Owner ☒	Dealer's City LEWISVILLE	State TX	Zip Code 75028		

Transmission Type		Powertrain	Vehicle Component Code
AUTOMATIC	☐ Antilock Brakes ☒ Cruise Control	REAR WHEEL DRIVE	100000 POWER TRAIN Multiple Failure: 30

FAILED COMPONENT(S)/PART(S) INFORMATION

Incident Date(s)	Failure Mileage	Failure Speed
05-JUL-2007	210	0

ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A TIRE FAILURE

Tire Make	Tire Model (Name or Number)	Tire Size (Example P215/65R15)
DOT No. (Example: DOTMAL9ABC036)	☐ Original Equipment ☐ Prior Repair	Failure Location:
Tire Component Code		Tire Failure Type

ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A CHILD SEAT FAILURE

Make:	Date Manufactured:	Model No./Name:
Seat Type:	Installation System:	
Child Seat Component Code:	Failed Part:	

APPLICABLE INCIDENT INFORMATION
(Please describe in detail the incident(s), Failure(s), Crash(es), and injury(ies).)

Crash	Fire	Number of Persons Injured	Number of Deaths	Reported to Police
☐ Yes ☒ No	☐ Yes ☒ No	0	0	N

Narrative Description of Incident(S), Crash(es), and Injury(ies).
Please describe (1) events leading up to the failure, (2) failure and its consequences, and (3) what was done to correct the failure; i.e, parts repaired or replaced (and if old part is available).

TRUCK LURCHES FORWARD WHEN A/C CONPRESSOR ENGAGES WHILE STOPPED. IT IS SO SEVERE THAT THE TRUCK MOVES FORWARD AND CREATES A POTENTIAL RISK FOR AN ACCIDENT

Include, if available: Police/Fire Department Report, Photos, and Repair Invoice. ATTACH ADDITIONAL SHEETS IF NECESSARY

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Form Approved: O.M.B. No. 2127-0008

U.S. Department of Transportation

National Highway Traffic Safety Administration

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1-888-DASH-2-DOT
(1-888-327-4236)
INTERNET:www.nhtsa.dot.gov/hotline

FOR AGENCY USE ONLY 100148

Date Received	Repository ☐
26-JUL-2007	Reference No. 10197535

OWNER INFORMATION (Type or Print)

Name [redacted]		Daytime Telephone Number [redacted]	E-mail Address
Address [redacted]		Evening Telephone Number	
City WASHINGTON	**State** PA	**Zip Code** [redacted]	

Do you authorize NHTSA to provide a copy of this report to the manufacturer of your vehicle? ☒ *YES* ☐ *NO*
In the absence of an authorization, NHTSA WILL NOT provide your name or address to the vehicle manufacturer.
Signature of Owner _____ Date ___/___/___

VEHICLE INFORMATION

17 digit Vehicle Identification Number Located at bottom of windshield on driver's side	Make	Model	Model Year
5TEUU42N07Z[redacted]	TOYOTA	TACOMA	2007

Date Purchased	Dealer's Name and Telephone Number			Engine:	Fuel Type:
23-MAY-07				No: Cylinders 6	Gas
Original Owner ☒	Dealer's City	State	Zip Code		

Transmission Type			Vehicle Component Code
AUTOMATIC	☒ Antilock Brakes ☒ Cruise Control	Powertrain 4 WHEEL DRIVE	180000 VEHICLE SPEED CONTROL Multiple Failure: 1

FAILED COMPONENT(S)/PART(S) INFORMATION

Incident Date(s)	Failure Mileage	Failure Speed
14-JUL-2007	2000	4

ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A TIRE FAILURE

Tire Make	Tire Model (Name or Number)	Tire Size (Example P215/65R15)
DOT No. (Example: DOTMAL9ABC036)	☐ Original Equipment ☐ Prior Repair	Failure Location:
Tire Component Code		Tire Failure Type

ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A CHILD SEAT FAILURE

Make:	Date Manufactured:	Model No./Name:
Seat Type:	Installation System:	
Child Seat Component Code:	Failed Part:	

APPLICABLE INCIDENT INFORMATION
(Please describe in detail the incident(s), Failure(s), Crash(es), and injury(ies).)

Crash	Fire	Number of Persons Injured	Number of Deaths	Reported to Police
☒ Yes ☐ No	☐ Yes ☒ No	0	0	N

Narrative Description of Incident(S), Crash(es), and Injury(ies).
Please describe (1) events leading up to the failure, (2) failure and its consequences, and (3) what was done to correct the failure; i.e, parts repaired or replaced (and if old part is available).

TL*THE CONTACT OWNS A 2007 TOYOTA TACOMA. WHILE DRIVING 4 MPH, THE CONTACT DEPRESSED THE BRAKE PEDAL, BUT THE VEHICLE SURGED FORWARD. THE VEHICLE CRASHED INTO A GATE. THE DEALER WAS UNABLE TO DUPLICATE THE FAILURE. THE CURRENT MILEAGE WAS 2,407 AND FAILURE MILEAGE WAS 2,000.

Include, if available: Police/Fire Department Report, Photos, and Repair Invoice. ATTACH ADDITIONAL SHEETS IF NECESSARY

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Form Approved: O.M.B. No. 2127-0008

U.S. Department of Transportation

National Highway Traffic Safety Administration

DOT Auto Safety Hotline

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1-888-DASH-2-DOT
(1-888-327-4236)
INTERNET:www.nhtsa.dot.gov/hotline

FOR AGENCY USE ONLY 100148

Date Received	Repository ☐
01-SEP-2007	Reference No. 10201655

OWNER INFORMATION (Type or Print)

Name [redacted]		Daytime Telephone Number [redacted]	E-mail Address [redacted]
Address [redacted]		Evening Telephone Number [redacted]	
City DOVER	**State** TN	**Zip Code** [redacted]	

Do you authorize NHTSA to provide a copy of this report to the manufacturer of your vehicle? ☒ *YES* ☐ *NO*
In the absence of an authorization, NHTSA WILL NOT provide your name or address to the vehicle manufacturer.
Signature of Owner _____ Date ___/___/___

VEHICLE INFORMATION

17 digit Vehicle Identification Number Located at bottom of windshield on driver's side	Make	Model	Model Year
5TELU42N67Z[redacted]	TOYOTA	TACOMA	2007

Date Purchased	Dealer's Name and Telephone Number	Engine:	Fuel Type:
31-OCT-06	PEPPERS TOYOTA 731/642-3900	No: Cylinders 6	Gas

Original Owner	Dealer's City	State	Zip Code
☒	PARIS	TN	38242

Transmission Type		Powertrain	Vehicle Component Code
AUTOMATIC	☒ Antilock Brakes ☒ Cruise Control	4 WHEEL DRIVE	180000 VEHICLE SPEED CONTROL Multiple Failure: 5

FAILED COMPONENT(S)/PART(S) INFORMATION

Incident Date(s)	Failure Mileage	Failure Speed
08-JUN-2007	16200	55

ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A TIRE FAILURE

Tire Make	Tire Model (Name or Number)	Tire Size (Example P215/65R15)
DOT No. (Example: DOTMAL9ABC036)	☐ Original Equipment ☐ Prior Repair	Failure Location:
Tire Component Code		Tire Failure Type

ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A CHILD SEAT FAILURE

Make:	Date Manufactured:	Model No./Name:
Seat Type:	Installation System:	
Child Seat Component Code:	Failed Part:	

APPLICABLE INCIDENT INFORMATION
(Please describe in detail the incident(s), Failure(s), Crash(es), and injury(ies).)

Crash	Fire	Number of Persons Injured	Number of Deaths	Reported to Police
☒ Yes ☐ No	☐ Yes ☒ No	1	0	Y

Narrative Description of Incident(S), Crash(es), and Injury(ies).
Please describe (1) events leading up to the failure, (2) failure and its consequences, and (3) what was done to correct the failure; i.e, parts repaired or replaced (and if old part is available).

OVER A PERIOD OF SEVERAL MONTHS AFTER PURCHASING A NEW 2007 TOYOTA TACOMA, I EXPERIENCED FIVE INCIDENTS OF BRAKE/ACCELERATION PROBLEMS FINALLY RESULTING IN A CRASH. FIRST INCIDENT: STOPPED AT A TRAFFIC LIGHT WITH MY FOOT ON THE BRAKE, THE TRUCK LUNGED FORWARD A FEW FEET. THE DEALERSHIP TOLD ME THEY COULD NOT FIND ANY PROBLEM. A MONTH LATER, STOPPED IN A GAS STATION DRIVE WITH MY FOOT ON THE BRAKE WAITING TO EXIT, THE REAR WHEELS BEGAN SPINNING OUT OF CONTROL. I PRESSED ON THE BRAKE AS HARD AS I POSSIBLY COULD TO KEEP FROM ENTERING TRAFFIC. THREE WEEKS LATER, APPROACHING THE BOTTOM OF A HILLY SHARP TURN, I TAPPED THE BRAKES TO SLOW DOWN. AGAIN THE REAR WHEELS ACCELERATED TO A HIGH RATE OF SPEED. I COULD NOT STOP THE TRUCK TO KEEP FROM STRIKING A VAN IN FRONT OF ME SO I CROSSED OVER A DOUBLE YELLOW LINE TO AVOID A COLLISION. IT TOOK ABOUT A THOUSAND YARDS TO GAIN CONTROL. THE DEALERSHIP SAID, "WE CAN'T FIX THE PROBLEM" UNTIL WE CAN DUPLICATE IT". I CALLED TOYOTA OF AMERICA, AGAIN ONLY TO BE TOLD THAT TOYOTA COULD DO NOTHING. THE FOURTH INCIDENT OCCURRED ON AN ENTRANCE RAMP TO A HIGHWAY. I TAPPED THE BRAKES TO SLOW DOWN. THE VEHICLE ACCELERATED TO A HIGH RATE OF SPEED. I GOT IT UNDER CONTROL QUICKLY. FINALLY THE FIFTH AND FINAL INCIDENT. COMING OUT OF NASHVILLE WHERE IT WAS RAINING HARD, I GOT FURTHER NORTHBOUND ON THE I-24 WHERE IT WAS RAINING LESS AND THE PAVEMENT WAS WET. WHILE IN THE

Include, if available: Police/Fire Department Report, Photos, and Repair Invoice. ATTACH ADDITIONAL SHEETS IF NECESSARY

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Form Approved: O.M.B. No. 2127-0008

U.S. Department of Transportation

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(1-888-327-4236)
INTERNET:www.nhtsa.dot.gov/hotline

FOR AGENCY USE ONLY 100148

Date Received	Repository ☐
08-SEP-2007	Reference No. 10202283

OWNER INFORMATION (Type or Print)

Name [redacted]		Daytime Telephone Number [redacted]	E-mail Address [redacted]
Address [redacted]		Evening Telephone Number	
City SPANAWAY	**State** WA	**Zip Code** [redacted]	

Do you authorize NHTSA to provide a copy of this report to the manufacturer of your vehicle? ☒ *YES* ☐ *NO*
In the absence of an authorization, NHTSA WILL NOT provide your name or address to the vehicle manufacturer.
Signature of Owner _____ Date ___/___/___

VEHICLE INFORMATION

17 digit Vehicle Identification Number Located at bottom of windshield on driver's side	Make	Model	Model Year
5TELU42N67Z[redacted]	TOYOTA	TACOMA	2007

Date Purchased	Dealer's Name and Telephone Number			Engine:	Fuel Type:
26-JUL-07				No: Cylinders 6	Gas
Original Owner ☒	Dealer's City	State	Zip Code		

Transmission Type			Vehicle Component Code
AUTOMATIC	☒ Antilock Brakes ☒ Cruise Control	Powertrain 4 WHEEL DRIVE	180000 VEHICLE SPEED CONTROL Multiple Failure: 1

FAILED COMPONENT(S)/PART(S) INFORMATION

Incident Date(s)	Failure Mileage	Failure Speed
07-SEP-2007	100	0

ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A TIRE FAILURE

Tire Make	Tire Model (Name or Number)	Tire Size (Example P215/65R15)
DOT No. (Example: DOTMAL9ABC036)	☐ Original Equipment ☐ Prior Repair	Failure Location:
Tire Component Code		Tire Failure Type

ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A CHILD SEAT FAILURE

Make:	Date Manufactured:	Model No./Name:
Seat Type:	Installation System:	
Child Seat Component Code:	Failed Part:	

APPLICABLE INCIDENT INFORMATION
(Please describe in detail the incident(s), Failure(s), Crash(es), and injury(ies).)

Crash	Fire	Number of Persons Injured	Number of Deaths	Reported to Police
☐ Yes ☒ No	☐ Yes ☒ No	0	0	N

Narrative Description of Incident(S), Crash(es), and Injury(ies).
Please describe (1) events leading up to the failure, (2) failure and its consequences, and (3) what was done to correct the failure; i.e, parts repaired or replaced (and if old part is available).

NUMEROUS OCCASIONS WHERE MY 2007 TOYOTA TACOMA WILL LURCH FORWARD WHEN AT A STOP LIGHT. AUTOMATIC TRANSMISSION, AND ON THE BRAKE. FEELS AS IF I HAVE BEEN TAPPED BY SOMEONE BEHIND ME. IT HAS NEVER RESULTED IN AN ACCIDENT, BUT I WILL NOT LET MY WIFE DRIVE THIS VEHICLE BECAUSE OF THIS SITUATION. *JB

Include, if available: Police/Fire Department Report, Photos, and Repair Invoice. ATTACH ADDITIONAL SHEETS IF NECESSARY

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.

Form Approved: O.M.B. No. 2127-0008

U.S. Department of Transportation

National Highway Traffic Safety Administration

DOT Auto Safety Hotline

Vehicle Owner's Questionnaire

To Report Vehicle Safety Defects
1-888-DASH-2-DOT
(1-888-327-4236)
INTERNET:www.nhtsa.dot.gov/hotline

FOR AGENCY USE ONLY 100148

Date Received	Repository ☐
12-SEP-2007	Reference No. 10202837

OWNER INFORMATION (Type or Print)

Name [redacted]		Daytime Telephone Number [redacted]	E-mail Address [redacted]
Address [redacted]			
City NORTH CHARLESTON	**State** SC	**Zip Code** [redacted]	Evening Telephone Number [redacted]

Do you authorize NHTSA to provide a copy of this report to the manufacturer of your vehicle? ☒ *YES* ☐ *NO*
In the absence of an authorization, NHTSA WILL NOT provide your name or address to the vehicle manufacturer.
Signature of Owner _____ Date ___/___/___

VEHICLE INFORMATION

17 digit Vehicle Identification Number Located at bottom of windshield on driver's side	Make	Model	Model Year
3TMJU62N07M[redacted]	TOYOTA	TACOMA	2007

Date Purchased	Dealer's Name and Telephone Number			Engine:	Fuel Type:
08-DEC-06	GENE REED TOYOTA			No: Cylinders 6	Gas
Original Owner ☒	Dealer's City NORTH CHARLESTON	State SC	Zip Code 29406		

Transmission Type		Powertrain	Vehicle Component Code
AUTOMATIC	☒ Antilock Brakes ☒ Cruise Control	REAR WHEEL DRIVE	103700 POWER TRAIN:AUTOMATIC TRANSMISSION:TORQUE CONV Multiple Failure: 100

FAILED COMPONENT(S)/PART(S) INFORMATION

Incident Date(s)	Failure Mileage	Failure Speed
12-SEP-2007	500	0

ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A TIRE FAILURE

Tire Make	Tire Model (Name or Number)	Tire Size (Example P215/65R15)
DOT No. (Example: DOTMAL9ABC036)	☐ Original Equipment ☐ Prior Repair	Failure Location:
Tire Component Code		Tire Failure Type

ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A CHILD SEAT FAILURE

Make:	Date Manufactured:	Model No./Name:
Seat Type:	Installation System:	
Child Seat Component Code:	Failed Part:	

APPLICABLE INCIDENT INFORMATION
(Please describe in detail the incident(s), Failure(s), Crash(es), and injury(ies).)

Crash	Fire	Number of Persons Injured	Number of Deaths	Reported to Police
☐ Yes ☒ No	☐ Yes ☒ No	0	0	N

Narrative Description of Incident(S), Crash(es), and Injury(ies).
Please describe (1) events leading up to the failure, (2) failure and its consequences, and (3) what was done to correct the failure; i.e, parts repaired or replaced (and if old part is available).

WHEN STOPPED AT IDLE ENGINE SPEED, MY 2007 TOYOTA TACOMA DBL CAB PRERUNNER V6 WILL SURGE / LUNGE SUDDENLY. ALTHOUGH I HAVE THE BRAKES FIRMLY APPLIED, THE TRUCK WILL STILL MOVE A LITTLE BIT. I'VE DAMAGED PERSONAL PROPERTY BECAUSE OF IT. NO INJURIES (YET), BUT IT'LL SURE GET YOUR ATTENTION WHEN IT HAPPENS.☐
ALSO, THE TRUCK WILL SOMETIMES ACCELERATE A BIT WHEN YOU HAVE TAKEN YOUR FOOT OFF OF THE GAS. NOTHING DRASTIC, BUT IT SHOULDN'T DO THIS.☐
THIS IS A MAJOR CONCERN WITH ME; ENOUGH THAT I WON'T LET ANYONE ELSE DRIVE MY VEHICLE FOR FEAR IT MAY STARTLE THEM AND THEY MAY LOSE CONTRROL OF IT.☐
THIS HAPPENS VERY FREQUENTLY.

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