



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

Date Received

30-DEC-2002

Repository

Reference No.
10001650

OWNER INFORMATION (Type or Print)

Name

Address

City **MARIETTA**

State **GA**

Zip Code

Daytime Telephone Number

E-mail Address

Evening Telephone Number

Do you authorize NHTSA to provide a copy of this report to the manufacturer of your vehicle? YES NO

In the absence of an authorized signature to the vehicle manufacturer.

Signature of Owner

Date **1/30/2003**

YES

VEHICLE INFORMATION

17 digit Vehicle Identification Number Located at bottom of windshield on driver's side

YV1T394DDY1114198

Make

VOLVO

Model

S80

Model Year

2000

Date Purchased

4-4-2000

Dealer's Name and Telephone Number

Chris Volvo

770 952 1800

Engine: **2.9 Liter**

No: Cylinders **6**

Fuel Type:

Original Owner

Dealer's City

MARIETTA

State

GA

Zip Code

30062

Transmission Type

Antilock Brakes

Powertrain

Cruise Control

Vehicle Component Code

AIR BAG FAILURE

TI-1200-ELECTRICAL SYSTEM WIRING-INTERIOR UNDER DASH

Multiple Failure:

FAILED COMPONENT(S)/PART(S) INFORMATION

Incident Date(s)

12-3-02

Failure Mileage

20,342

Failure Speed

20-25 MPH

AIR BAG for DRIVER failed to deploy in frontal collision that resulted in a crash.

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: DOTM13ABC036)

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), 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).

WHILE TRAVELING AT 20MPH, CONSUMER STATES ANOTHER DRIVER PULLS IN FRONT AND CONSUMER T-BONED OTHER DRIVER. THE PASSENGER FRONT AIRBAG DEPLOYED, AND THE DRIVERS SIDE AIRBAG DID NOT DEPLOY. PLEASE PROVIDE ANY FURTHER INFORMATION. TS

my Volvo's front end was destroyed. MY Volvo was a total LOSS. My driver's side air bag failed to deploy. My 3 point system saved me. The front passenger side airbag deployed even though no person occupied that seat.

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 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.