



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

2003 8075  
FOR AGENCY USE ONLY 1367

Date Received: 07-FEB-2003  
Repository:   
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**OWNER INFORMATION (Type or Print)**

Name: [Redacted]  
Address: [Redacted]  
City: NEEDHAM State: MA Zip Code: [Redacted]

Daytime Telephone Number: [Redacted] E-mail Address:  
Evening Telephone Number: Same

Do you authorize NHTSA to provide a copy of this report to the manufacturer of your vehicle?  YES  NO  
In the absence of a signature or address to the vehicle manufacturer.  
Signature of Owner: [Redacted] Date: 1/1

**VEHICLE INFORMATION**

Vehicle Identification Number: WVWVD63B12E310450  
Make: VOLKSWAGEN Model: PASSAT Model Year: 2002  
Date Purchased: 2/1/02 Dealer's Name and Telephone Number: Bernardi V.W. 508-651-3023  
Original Owner: [Redacted] Dealer's City: Natick, MA State: MA Zip Code: [Redacted]  
Engine: No. Cylinders: 4 Fuel Type:  
Transmission Type: Automatic  
 Antilock Brakes Powertrain  
 Cruise Control  
Vehicle Component Code: 116000 ELECTRICAL SYSTEM:IGNITION  
Multiple Failure:

**FAILED COMPONENT(S)/PART(S) INFORMATION**

Incident Date(s): 26-JAN-2003 Failure Mileage: 780 Failure Speed: 1800

**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: D07H1A19ABC036)  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:  Yes  No Fire:  Yes  No  
Number of Persons Injured: Number of Deaths: Reported to Police: 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 DRIVING VEHICLE WOULD NOT EXCEED SPEEDS OF 3 MPH DUE TO DEFECTIVE IGNITION COILS. DEALER NOTIFIED. PH

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.