



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 1367

Date Received

Repository ☐

PN 10-011
22-AUG-2003

Reference No.
10034288

OWNER INFORMATION (Type or Print)

Name

Address

City

HAVERHILL

State MA

Zip Code

Daytime Telephone Number

E-mail Address

Evening Telephone Number

Do you authorize NHTSA to
In the absence of an author
Signature of Owner

Manufacturer of your vehicle? ☐ YES ☒ NO
Name or address to the vehicle manufacturer.
Date 9/22/03

VEHICLE INFORMATION

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

Make

VOLKSWAGEN

Model

PASSAT

Model Year

1999

Date Purchased

Dealer's Name and Telephone Number
NORTH SHORE VOLKSWAGEN 978-927-6000

Engine

No. Cylinders

Fuel Type

Original Owner

Dealer's City

BEVERLY

State

MA

Zip Code

Transmission Type

☐ Antilock Brakes

Powertrain

☐ Cruise Control

Vehicle Component Code

071110 FUEL SYSTEM, GASOLINE-STORAGE-TANK ASSEMBLY-FILLER

Multiple Failure: 1

FAILED COMPONENT(S)/PART(S) INFORMATION

Incident Date(s)

Failure Mileage

Failure Speed

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: D0THALSABC036)

☐ Original Equipment
☐ Prior Report

Failure Location:

Tire Component Code

The Failure Type

ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A CHILD SEAT FAILURE

Make:

Date Manufactured:

Model No./Name:

Seat Type:

Installation Systems

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).

THE DEALERSHIP IS UNABLE TO PERFORM THE RECALL FOR FILLER NECK 02 V 026 000 WITHIN A REASONABLE TIME FRAME. THEY ARE MAKING APPOINTMENTS A MONTH IN ADVANCE.*AK

to 6 weeks

Include, if available: Police/Fire Department Report, Photos, and Repair Invoices.

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 Administration 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.