



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

FOR AGENCY USE ONLY 1367

Date Received

Repository ☐

21-NOV-2003

Reference No.

10048447

1:04

OWNER INFORMATION (Type or Print)

Name

Address

City

POWELL

State TN

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 a signature, provide your name or address to the vehicle manufacturer.

Signature of Owner

Date 12-17-03

VEHICLE INFORMATION

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

4V67DARJ6W

Make

VOLVO

Model

VN770

Model Year

1998

Date Purchased

8-02

Dealer's Name and Telephone Number

Volunteer 10/02

Engine: Detroit

No: Cylinders

Fuel Type:

Diesel

Original Owner

☐

Dealer's City

Knoxville

State

TN

Zip Code

Transmission Type

13 SPT

☒ Anti-lock Brakes

Powertrain

☒ Cruise Control

Vehicle Component Code

353000 EQUIPMENT-ELECTRICAL

Multiple Failures: -1-

FAILED COMPONENT(S)/PART(S) INFORMATION

Incident Date(s)

11-14-03

Failure Mode(s)

353000

Failure Speed

35 mph

Electrical switch controlling Built in Refrigerator Freezer

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: DOTM19ABC035)

☐ 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

0

Number of Deaths

0

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 ON THE INTERSTATE, CONSUMER SMELLED AN ELECTRICAL SHORT SMELL. SMOKE STARTED COMING FROM THE SLEEPER BIRTH AREA, THEN THE CABIN WAS IN FLAMES. THE FIRE INSPECTOR INDICATED THAT THE FIRE WAS CAUSED BY AN ELECTRICAL SHORT IN THE SWITCH THAT CONTROLLED THE BUILT IN REFRIGERATOR FREEZER. *NLM

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

ATTACH ADDITIONAL SHEETS IF NECESSARY

The Privacy Act of 1976 (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 by 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.

Narrative Description of Incident(s), Failure(s), Crash(es), and Injury(ies)

While Driving down I 95 South Bound, I noticed smoke in front cab of truck. By the time I got truck stopped I knew where shooting out around curtain. I then stood up to get out. By then entire cab was filled with black smoke. I could not breathe or see. I Bailed out of passenger side to the ground. When I opened door the oxygen rushed in. By then it was too late. Fire Response arrived within 15 minutes. By then it was too late. The truck was a total loss. I feel that Volvo used substandard wiring and associated electrical parts. In other words it should have BARS of use or Backup breaker. After some investigations I have received of fines from these types of Volvo vehicles in port.

U.S. Department of Transportation

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400 Seventh St., S.W.
Washington, D.C. 20590

Official Business
Penalty for Private Use \$300

BUSINESS REPLY MAIL

FIRST CLASS PERMIT NO 73173 WASHINGTON, D.C.

POSTAGE WILL BE PAID BY NATL. HWY. TRAFFIC SAFETY ADMIN.

U.S. Department of Transportation
National Highway Traffic Safety Administration
Office of Defects Investigation, NVS-216
400 7th Street, SW
Washington, DC 20590

POSTAGE
NECESSARY
IF MAILED
IN THE
UNITED STATES

**VEHICLE
OWNER'S
QUESTIONNAIRE**

DOT AUTO SAFETY HOTLINE

TO REPORT VEHICLE SAFETY DEFECTS
COMPLETE THIS FORM
OR

DASH2DOT

and dial toll free at

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DOT Auto Safety Hotline
(DASH) 2 DOT



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<http://www.nhtsa.gov/defects>