



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 100161

Date Received

Repository ☐

26 JAN 9:45
23-DEC-2003

Reference No.
10051969

OWNER INFORMATION (Type or Print)

Name

Address

City NAPERVILLE

State IL

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 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
WVWMA63B2

Make
VOLKSWAGEN

Model
PASSAT

Model Year
1999

Date Purchased

Dealer's Name and Telephone Number

Engine:

Fuel Type:

9/2002

No. Cylinders

Original Owner

Dealer's City

State

Zip Code

4

GAS

Transmission Type

☒ Antilock Brakes

Powertrain

Vehicle Component Code

MANUAL

☒ Cruise Control

017500 STEERING/LINKAGES/TIE ROD ASSEMBLY

Multiple Failure: 1

FAILED COMPONENT(S)/PART(S) INFORMATION

Incident Date(s)

Failure Mileage

Failure Speed

NOV/DEC-03

45000

N/A

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: DOTH13ABC036)

☐ 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).

DURING A SCHEDULED MAINTENANCE CHECK, AN INDEPENDENT MECHANIC DETERMINED THAT THE TIE RODS WERE LOOSE AND MUST BE REPLACED. PLEASE PROVIDE ANY ADDITIONAL INFORMATION. *NLM

Also THERE WAS A RECALL ON SOME 1999 & 2000 models for TIE ROD. However, I was informed by VW that my model WAS NOT INCLUDED

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 synopsis thereof, may be used in support of the agency's action.