



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

Ord\_or \_\_\_\_\_  
r\_cd \_\_\_\_\_  
od\_r \_\_\_\_\_  
up\_lr \_\_\_\_\_

Reference No.

10063079

## OWNER INFORMATION (Type or Print)

Apt. No.

Daytime Telephone Number

City  
GERMANTOWNState  
MD

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 2/25/04

## PRODUCT INFORMATION

Vehicle Identification No. (VIN)  
(17 Digits)(Located at bottom of  
windshield on driver's side)

Make

Model

Year

W B A C B 4 3 2 7 S F

BMW

325i

1995

Purchased Date

12/26/94

Dealer's Name

TOM HESSE

Engine Size  
(CID/CC/L) Turbo Diesel Gas Fuel Injection New  Used

Dealer's City

SCRANTON

State

PA

Zip Code

Manufacture Date  
(on driver's door or pillar)

8/1995

Transmission Type

 Manual Automatic

Restraint System

 Driverside Air Bag  Molotov Passengerside Air Bag  2-Point Belt 3-Point Belt

Cruise Control

 Yes No

Drivetrain

 Front Rear 4-Wheel

Vehicle Type

 Car  Sport Utility Van  Truck Minivan  Motorcycle Other

Body Style

 2-Door  4-Door Stationwagon Pick Up Truck Other

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

Part Name(s)

SAFETY BELT

Location

 Left Right Front Rear

Failed Part(s)

 Original Replacement

Handicap Adaptive Equip

 Yes No

## TO BE COMPLETED WHEN REPORTING A TIRE FAILURE

Tire Brand

Tire Name

Complete Tire Size

DOT No.

No. of Failures

Date(s) of Failure(s)

Mileage at Failure(s)

Vehicle Speed at Failure(s)

Failed Part(s)  
Available? Yes NoNHTSA Previously  
Contacted? Yes No

## APPLICABLE INCIDENT INFORMATION

(Please describe in detail the incident(s), failure(s), crash(es), and injury(ies). Attach photos if available.)

Crash

 Yes  No

Fire

 Yes  No

Number of Persons Injured

Number of Fatalities

Reported to Manufacturer

 Yes  No

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

FOR THIRD OR FOURTH TIME REPLACING DRIVER SIDE SEAT BELT

Continues on back.

The Privacy Act of 1974 - Public Law 93-579 This information is requested pursuant to a 49 U.S.C. Chapter 301. You are under no obligation to respond to this questionnaire. Your response may be used to assist NHTSA in determining whether a manufacturer should take appropriate action to correct a safety defect. If NHTSA proceeds with administration enforcement or litigation against a manufacturer, your response, or a statistical summary thereof, may be used in support of the agency's action.