



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 ☐

2004-05-04-6

Reference No.
10075627

OWNER INFORMATION (Type or Print)

Name

Address

City

DOUGLASVILLE

State

GA

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 authorized signature, provide your name or address to the vehicle manufacturer.
Signature of Owner _____ Date 6/14/04

VEHICLE INFORMATION

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

WVWMAZ3B2Y1

Make

VOLKSWAGEN

Model

PASSAT

Model Year

2000

Date Purchased

Dealer's Name and Telephone Number

Engine

No. Cylinders

Fuel Type:

Original Owner

☒

Dealer's City

State

Zip Code

Transmission Type

MANUAL

☒ Antilock Brakes

☒ Cruise Control

Powertrain

FRONT WHEEL DRIVE

Vehicle Component Code

034530 SERVICE BRAKES, HYDRAULIC: FOUNDATION COMPONENTS

Multiple Failures: 1

FAILED COMPONENT(S)/PART(S) INFORMATION

Incident Date(s)

14-MAY-2004

Failure Mileage

62000

Failure Speed

62

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: DOTM19ABC036)

☐ 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 ON THE HIGHWAY AT 62 MPH THE VEHICLE STARTED SHAKING, LOST POWER THEN COASTED TO A STOP. THIS OCCURRED BECAUSE THE LEFT REAR ROTOR MELTED DOWN AND GUMMED UP THE BRAKE FLUID. THIS RESULTED IN THE BRAKING SYSTEM AND TRANSMISSION BEING INOPERATIVE. THE DEALERSHIP COULDN'T IDENTIFY THE CAUSE OF THE ROTOR MELT DOWN, THEY ONLY REPLACED THE MELTED AND DAMAGED PARTS. *NM

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

ATTACH ADDITIONAL SHEETS IF NECESSARY

The Privacy Act of 1974 (Public Law 93-570) 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.