



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 252

Date Received: 2004 DEC 7 9:38
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OWNER INFORMATION (Type or Print)

Name: [Redacted]
Address: [Redacted]
City: CLIFTON State: NJ Zip Code: [Redacted]

Daytime Telephone Number: [Redacted] E-mail Address: [Redacted]
Evening Telephone Number: [Redacted]

Do you authorize NHTSA to provide a copy of this report to the manufacturer of your vehicle? YES NO
In the absence of an NHTSA DOT provide your name or address to the vehicle manufacturer.
Signature of Owner: [Redacted] Date: 12/11/2004

VEHICLE INFORMATION

17 digit Vehicle Identification Number: YV1R561R512 [Redacted]
Make: VOLVO Model: S60 Model Year: 2001
Date Purchased: 05/15/2004 Dealer's Name and Telephone Number: ALCO AUTO SALES
Original Owner: Dealer's City: PLEASANTVILLE, NJ State: NJ Zip Code: [Redacted]
Transmission Type: AUTOMATIC Antilock Brakes: Powertrain: FRONT WHEEL DRIVE
Cruise Control: Vehicle Component Code: 44000 AIR BAGS:FRONTAL DEPLOYED
Multiple Failure: 1, 2

FAILED COMPONENTS (FAILURE INFORMATION)

Original Mileage: 43000 Current Mileage: ?
Date of Failure: 12-06-2004
Failure Description: CAR WAS SOLD TO ME WITH THE 2 FRONT AIRBAGS DEPLOYED. THERE WAS NO INFO ABOUT THIS ON ANY RECORDS ABOUT THE CAR.

ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A TIRE FAILURE

Tire Make: [Redacted] Tire Model (Name or Number): [Redacted] Tire Size (Example P215/65R15): [Redacted]
DOT No. (Example: DOTM1ABC036): [Redacted] Original Equipment: Prior Repair: Failure Location: [Redacted]
Tire Component Code: [Redacted] Tire Failure Type: [Redacted]

ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A CHILD SEAT FAILURE

Make: [Redacted] Date Manufactured: [Redacted] Model No./Name: [Redacted]
Seat Type: [Redacted] Installation System: [Redacted]
Child Seat Component Code: [Redacted] Failed Part: [Redacted]

APPLICABLE INCIDENT INFORMATION

(Please describe in detail the incident(s), failure(s), crash(es), and injury(ies).)
Crash? Yes No
Fic 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 THE VEHICLE WAS PARKED WITHOUT WARNING THE AIR BAGS DEPLOYED INADVERTENTLY. NO INJURIES. THE DRIVER HAD THE VEHICLE TOWED TO THE DEALER FOR INSPECTION. PLEASE FILL IN ADDITIONAL INFORMATION. *30
THIS CAR WAS IN A FRONTAL CRASH BEFORE I PURCHASED IT. IT HAS A CRACKED TRANSMISSION, A POWER STEERING LEAK & AN OIL LEAK, AS WELL AS THE 2 DEPLOYED AIRBAGS.

Include, if available: Police/FBI 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 a 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.