



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 100222

Date Received

Repository

03 NOV 2004

Reference No.  
10099300

OWNER INFORMATION (Type or Print)

Name [REDACTED]  
Address [REDACTED]  
City MIDLAND State TX 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 authorized signature, NOT provide your name or address to the vehicle manufacturer.  
Signature of Owner [REDACTED] Date 11/2/04

VEHICLE INFORMATION

17 digit Vehicle Identification Number Located at bottom of windshield on driver's side: 4V4ND1GH8YM [REDACTED]  
Make VOLVO Model V4610 Model Year 2000  
Date Purchased 04-02 Dealer's Name and Telephone Number BRUGGERS  
Original Owner  Dealer's City DOERSA State TX Zip Code [REDACTED]  
Transmission Type MANUAL  Antilock Brakes  Cruise Control Powertrain 6X4  
Vehicle Component Code AIRLEAK ON ENGINE BRAKE CONTROL  
04600 SERVICE BRAKES, AIR-ANTILOCK, BRAKE CONTROL  
Multiple Failure: 3

FAILED COMPONENT(S)/PART(S) INFORMATION

Incident Date(s) 01-OCT-2004 Failure Mileage 285250 Failure Speed [REDACTED]

ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A TIRE FAILURE

Tire Make [REDACTED] Tire Model (Name or Number) [REDACTED] Tire Size (Example P215/B5R15) [REDACTED]  
DOT No. (Example: DOTM15ABC036)  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, failure, crash, and injury.)

Crash  Yes  No Fire  Yes  No  
Number of Persons Injured [REDACTED] Number of Deaths [REDACTED] Reported to Police [REDACTED]

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).

THERE WAS AN AIR LEAK IN THE BRAKES... THIS WAS THE THIRD TIME THIS HAPPENED. ONE COULD HEAR THE AIR LEAKING FROM THE BRAKES. \*AK AIRLEAK ON ENGINE BRAKE CONTROL RESULTS IN AIR BRAKE PRESSURE LOSS

Include, if available: Police/Fire Department Report, Photos, and Repair Involes. 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 statistical summary thereof, may be used in support of the agency's action.