



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 100192

Date Received: 2005 11 22
22-NOV-2004

Repository
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OWNER INFORMATION (Type or Print)

Name: [REDACTED]
Address: [REDACTED]
City: KEY LARGO State: FL Zip Code: [REDACTED]

Daytime Telephone Number: [REDACTED] Email 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 authorization, NHTSA WILL NOT provide your name or address to the vehicle manufacturer.

Signature of Owner: _____ Date: 11/22/04

VEHICLE INFORMATION

17 digit Vehicle Identification Number Located at bottom of windshield on driver's side: 3JWBA81EDV [REDACTED]
Make: VOLKSWAGEN Model: CABRIO CONVERTIBL Model Year: 1998
Date Purchased: 8-2001 Dealer's Name and Telephone Number: Maronee
Engine: No: Cylinders: Fuel Type: Gas
Original Owner: Dealer's City: Miami State: FL Zip Code: [REDACTED]
Transmission Type: AUTOMATIC Antilock Brakes Powertrain: FRONT WHEEL DRIVE Vehicle Component Code: 162900 STRUCTURE:BODY:ROOF AND PILLARS
 Cruise Control Multiple Failure: 1

FAILED COMPONENT(S)/PART(S) INFORMATION

Incident Date(s): 22-NOV-2004 Failure Mileage: Failure Speed:

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: DOTM1A9ABC036) 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).

THE CONVERTIBLE TOP RIPPED ABOVE THE REAR WINDOW. THE CONSUMER CONTACTED THE MANUFACTURER AND THE DEALER AND WAS TOLD THE VEHICLE WAS NOT INCLUDED IN THE RECALL. THE MANUFACTURER TOLD THE OWNER THAT THE VEHICLE WAS NO LONGER UNDER WARRANTY. PROVIDE FURTHER DETAILS. *JB The dealer stated my car of different years did get a recall (a different model #'s same year). I found many complaints of same tear/rip in roof same spot. The material the roof is made out of disintegrates as a few years goes by. The car is noisy and potentially dangerous by not having a secure roof.

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