



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 100248

Date Received

11-JAN-2005

Repository ☐

Reference No.

10107187

OWNER INFORMATION (Type or Print)

Name

Address

City

NEW BRITAIN

State CT

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 authorization, NHTSA WILL NOT provide your name or address to the vehicle manufacturer.

Signature of Owner

Date

VEHICLE INFORMATION

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

Make

VOLKSWAGEN

Model

PASSAT

Model Year

1996

Date Purchased

02/19/1999

Dealer's Name and Telephone Number

Langan Volkswagen

1-860-633-0261

Engine:

No. Cylinders 6

Fuel Type:

Gas

Original Owner

☐

Dealer's City

Glastonbury, Ct

State

CT

Zip Code

06051

Transmission Type

AUTOMATIC

☒ Antilock Brakes

☒ Cruise Control

Powertrain

2 WHEEL DRIVE

Vehicle Component Code

036000 SERVICE BRAKES, HYDRAULIC:ANTILOCK

Multiple Failure: 1, 2

FAILED COMPONENT(S)/PART(S) INFORMATION

Incident Date(s)

06-DEC-2004

Failure Mileage

36230

Failure Speed

-

ABS Systems x2

Dealer Mech. State IT happens all the time

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), including the circumstances and information.)

Crash

☐ Yes ☒ No

Fire

☐ 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).

THE BRAKE CHECK LIGHT MAINTAINED ON AND THE ANTI-LOCK BRAKES TEND NOT TO OPERATE, CAUSING THE VEHICLE TO HAVE EXTENDED STOPPING DISTANCE. TAKEN TO DEALER FOR CHECK UP AND, RESULTS SHOWED THAT THERE IS AN ELECTRICAL PROBLEM WITH THE COMPUTER. *AK

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.

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

The problem with ABS system is that the cost is over 2000\$ and the owners may not chose to repair the problem. If the cost of repair is more than the value of the car. May the people be asking Manufacturers to build best cost safety devices or people will stop repairing and taking chances with their lives and others lives.

NECESSARY

U.S. Department
of Transportation

**National Highway
Traffic Safety
Administration**

400 Seventh St., S.W.
Washington, D.C. 20590

Official Business
Penalty for Private Use \$300



NO POSTAGE
NECESSARY
IF MAILED
IN THE
UNITED STATES

BUSINESS REPLY MAIL

FIRST CLASS PERMIT NO 73173 WASHINGTON, D.C.

POSTAGE WILL BE PAID BY NATL. HWY. TRAFFIC SAFETY ADMIN.

U.S. Department of Transportation
National Highway Traffic Safety Administration
Office of Defects Investigation, NVS-216
400 7th Street, SW
Washington, DC 20590



**VEHICLE
OWNER'S**

QUESTIONNAIRE

DOT AUTO SAFETY HOTLINE

**TO REPORT VEHICLE SAFETY DEFECTS
COMPLETE THIS FORM
OR**

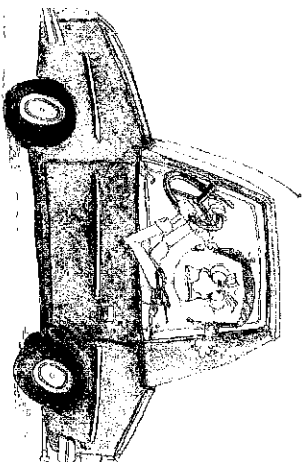
DASH2DOT

and dial toll free at

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DOT Auto Safety Hotline
(DASH) 2 DOT



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TO PROTECT UNWARRANTED
INVASION OF PERSONAL PRIVACY
PURSUANT TO EXEMPTION 6 OF
THE FREEDOM OF INFORMATION
ACT (FOIA), 5 U.S.C. 552(b)(6).