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 |
|---|---|
| 12-JAN-2005 | |
| | Reference No. 10107246 |

**OWNER INFORMATION** (Type or Print)

| Name | | Daytime Telephone Number | E-mail Address |
|---|---|---|---|
| Address | [redacted] | [redacted] | |
| City: RAPID CITY | State: SD | Zip Code: [redacted] | 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 | Model | Model Year |
|---|---|---|---|
| 3VWRF81H7WM[redacted] | VOLKSWAGEN | PASSAT | 1998 |

| Date Purchased | Dealer's Name and Telephone Number | | Engine: | Fuel Type: |
|---|---|---|---|---|
| August 2001 | Sendell Buick | | No: Cylinders | Diesel |
| Original Owner ☐ | Dealer's City: Greensburg | State: PA Zip Code: 15672 | | |

| Transmission Type | | Powertrain | Vehicle Component Code |
|---|---|---|---|
| MANUAL | ☐ Antilock Brakes ☒ Cruise Control | FRONT WHEEL DRIVE | 063000 ENGINE AND ENGINE COOLING:EXHAUST SYSTEM |
| | | | Multiple Failure: 2 |

**FAILED COMPONENT(S)/PART(S) INFORMATION**

| Incident Date(s) | Failure Mileage | Failure Speed |
|---|---|---|
| 05-JAN-2004 | 137000 | Ø |

**ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A TIRE FAILURE**

| Tire Make | Tire Model (Name or Number) | Tire Size (Example P215/65R15) |
|---|---|---|
| Cooper * Bridgestone | | 195 60 R14 |
| DOT No. (Example: DOTMLSABC036) | ☐ Original Equipment ☐ Prior Repair | Failure Location: Steering Column |
| 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 | Fire | Number of Persons Injured | Number of Deaths | Reported to Police |
|---|---|---|---|---|
| ☐ Yes ☒ No | ☐ Yes ☒ No | | | 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 CONSUMER'S VEHICLE HAS SMOKE COMING FROM THE STEERING COLUMN. THE SMOKE HAS AN ODOR OF BURNING OIL AND SMOKE COMBINED. THE APPEARANCE IS WHITE. THIS STARTED ONE YEAR AGO AND WENT AWAY, AND NOW THE PROBLEM RECURRED.*AK

Took car in to the VW dealership in Rapid City, SD. They said ** there was an excess of grease on certain parts under the steering wheel / in the steering wheel. When dust built up this would cause the smoke & smell. No problems since. No evidence of fire or burnt wires in the area.

Include, if available: Police/Fire Department Report, Photos, and Repair Invoice. ATTACH ADDITIONAL SHEETS IF NECESSARY