



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 10014B

Date Received
2005 AUG 02 11:50:07
02-AUG-2005

Repository
Reference No.
10130995

OWNER INFORMATION (Type or Print)

Name: [REDACTED] Daytime Telephone Number: [REDACTED] E-mail Address: [REDACTED]
Address: [REDACTED]
City: ONEONTA State: NY Zip Code: [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 your signature, please print your name or address to the vehicle manufacturer.
Signature of Owner: [REDACTED] Date: 8/18/05

VEHICLE INFORMATION

17 digit Vehicle Identification Number Located at bottom of windshield on driver's side: YV1TS64D [REDACTED]
Make: VOLVO Model: S80 Model Year: 2000
Date Purchased: 01-AUG-99 Dealer's Name and Telephone Number: NEMETH MOTORS NEMETH
Engine: No. Cylinders: 8 Fuel Type: Gas
Original Owner: Dealer's City: LATHAM State: NY Zip Code: 12110
Transmission Type: AUTOMATIC Antilock Brakes Cruise Control
Powertrain: FRONT WHEEL DRIVE
Vehicle Component Code: 1B1000 VEHICLE SPEED CONTROL:ACCELERATOR PEDAL
Multiple Failure:

FAILED COMPONENT(S)/PART(S) INFORMATION

Incident Date(s): 05-MAR-2004 Failure Mileage: 18,000-20,000 79,738 Failure Speed: 60-62 MPH PASSING A CAR ON A 2 LANE ROAD

ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A TIRE FAILURE

Tire Make: [REDACTED] Tire Model (Name or Number): [REDACTED] Tire Size (Example P215/85R15): [REDACTED]
DOT No. (Example: DOTM4SABC036): [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 the circumstances of the incident(s), failure(s), crash(es), and injury(ies).)

Crash: Yes No Fire: Yes No
Number of Persons Injured: [REDACTED] Number of Deaths: [REDACTED] 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).

DT: WHILE DRIVING CONSUMER NOTICED EVERY TIME TOOK FOOT OFF THE GAS PEDAL AND CAR STALLED. THE CAR WOULD SHUT DOWN COMPLETELY SOMETIMES. THERE WAS STILL ELECTRICAL POWER IN THE CAR. THERE WAS NO POWER STEERING OR POWER BRAKES WHEN IT STALLED. THE CAR WOULD START BACK UP RIGHT AWAY. THERE ARE CHECK ENGINE LIGHTS ON IN THE VEHICLE. THERE WAS A CODE SHOWING WHEN THE CAR STARTED. THE CAR WAS TAKEN TO THE DEALERSHIP, WHO ADVISED THAT THERE WAS A PROBLEM WITH THE AIR MASS SENSOR. THIS SENSOR WAS REPLACED. ON APRIL 18 2004 WHILE OWNER'S WIFE WAS TRAVELING AND TRYING TO PASS SOMEONE THE CAR SHUT DOWN COMPLETELY. THERE WAS A CHECK ENGINE LIGHT THAT SAID SOMETHING LIKE "CHECK ENGINE EMERGENCY." THERE WAS NO POWER STEERING OR POWER BRAKES. THEN THE WIFE HAD JUST ENOUGH POWER TO PULL OFF TO THE SIDE OF THE ROAD AND A TOW TRUCK BROUGHT THE CAR TO DEALERSHIP. THE CAR WOULD NOT TURN BACK ON. *AK

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

The Privacy Act of 1974 (Public Law 93-502) 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)

What I am adding to the information on the previous page is that my life was in extreme danger at the time of my passing the vehicle on the road two lane road. To this day I really don't know how I was able to get my car to the side of the road, but thank God I did.



ATTACH ADDITIONAL SHEETS IF 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

9-6
3-70



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

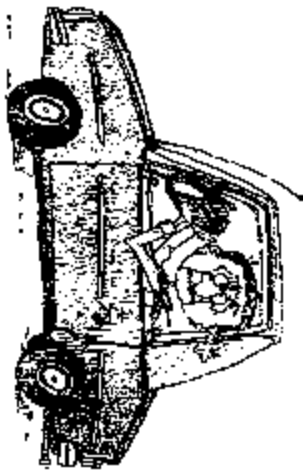
DASH2DOT

and dial toll free at

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DOT Auto Safety Hotline (DASH) 2 DOT



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THE ATTACHMENTS TO THIS DOCUMENT HAVE BEEN REMOVED 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).