



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 100148

Date Received

Repository ☐

2005 NOV 14 PM 4: 8
24-OCT-2005

Reference No.
10140613

OWNER INFORMATION (Type or Print)

Name

Address

City JAMESTOWN

State NC

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 authorized signature, provide your name or address to the vehicle manufacturer.

Signature of Owner

Date 11/4/05

VEHICLE INFORMATION

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

WVWKG61J74D

Make

VOLKSWAGEN

Model

R32

Model Year

2004

Date Purchased
05-AUG-05

Dealer's Name and Telephone Number
LEITH ACRUA 919-460-8200

Engine:

No: Cylinders 6

Fuel Type:

Gas

Original Owner

☐

Dealer's City

CARY

State

NC

Zip Code

27511

Transmission Type

☒

Antilock Brakes

Powertrain

ALL WHEEL DRIVE

MANUAL

☒

Cruise Control

Vehicle Component Code

135000 VISIBILITY: REARVIEW MIRRORS/DEVICES

Multiple Failure: 1

FAILED COMPONENT(S)/PART(S) INFORMATION

Incident Date(s)

15-AUG-2005

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: 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), 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).

DT: CONTACT STATED THAT REARVIEW MIRROR SHOOK TO THE POINT THAT HE COULD NOT SEE THROUGH IT. EVERY TIME WHILE DRIVING THE VEHICLE IT SHOOK. WHEN GOING OVER A BUMP IT GOT WORSE. THIS HAPPENED SINCE THE CONTACT PURCHASED THE VEHICLE. *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)

This is my 3rd car like this one and had no problems with other cars. Took to dealership and they said there is nothing they can do.

When driving the car the mirror shakes and vibrates so bad you can not see clear through it. The glass seems to be loose in its frame. I tried to use cardboard between the glass and frame and that seemed to help a little.

I have to use the side mirrors instead of the rear view mirror. Flow of greenhorn refuses to fix the problem under my warranty.

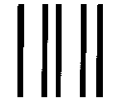
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U.S. Department
of Transportation

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

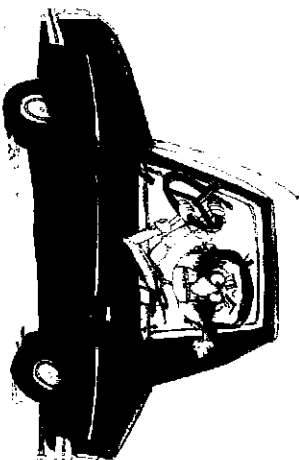
DASH2DOT

and dial toll free at

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DOT Auto Safety Hotline
(DASH) 2 DOT



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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).