



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

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21-DEC-2005

Repository ☐

Reference No.

10145780

OWNER INFORMATION (Type or Print)

Name

Address

City

JEFFERSONVILLE

State

IN

Zip Code

Daytime Telephone Number

E-mail Address

Evening Telephone Number

Do you authorize NHTSA to provide information to the manufacturer of your vehicle? ☐ YES ☒ NO
In the absence of an authorized signature or address to the vehicle manufacturer.

Signature of Owner

Date 01/05/06

VEHICLE INFORMATION

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

2WWSF28M2734

Make

VOLKSWAGEN

Model

JETTA

Model Year

2000

Date Purchased

01-AUG-99

Dealer's Name and Telephone Number

KLAPP AUTO GROUP 812-948-1541

Engine:

No. Cylinders

Fuel Type:

Diesel

Original Owner

☒

Dealer's City

CLARKSVILLE

State

IN

Zip Code

47129

Transmission Type

MANUAL

☒ Antilock Brakes

☒ Cruise Control

Powertrain

FRONT WHEEL DRIVE

Vehicle Component Code

125100 EXTERIOR LIGHTING: BRAKE LIGHTS: SWITCH

Multiple Failure: 1

FAILED COMPONENT(S)/PART(S) INFORMATION

Incident Date(s)

19-DEC-2005

Failure Mileage

234508

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: DOTM1BABC038)

☐ 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: THE CONTACT HAD RECALL 04V000000 REPAIRS ON BRAKE LIGHTS COMPLETED OVER A YEAR AGO, AND NOW THE FAILURE RECURRED. THE REPAIRS WERE MADE AT THE CONTACT'S EXPENSE. THE DEALER AND MANUFACTURER OFFERED NO FREE REMEDY. *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 responses 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 responses, or a statistical summary thereof, may be used in support of the agency's action.