



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

2006 APR -6 PM 2:41
16-MAR-2006

Repository ☐

Reference No.
10152844

OWNER INFORMATION (Type or Print)

Name
Address
City HUNTINGTON WOODS State MI 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 1/1

VEHICLE INFORMATION

17 digit Vehicle Identification Number Located at bottom of windshield on driver's side WVWFE8		Make VOLKSWAGEN	Model PASSAT	Model Year 1998
Date Purchased 01-AUG-02	Dealer's Name and Telephone Number		Engine: No. Cylinders 6	Fuel Type: Gas
Original Owner ☐	Dealer's City	State	Zip Code	
Transmission Type AUTOMATIC	☒ Antilock Brakes ☒ Cruise Control	Powertrain FRONT WHEEL DRIVE	Vehicle Component Code 116100 ELECTRICAL SYSTEM:IGNITION:SWITCH Multiple Failure: 1	

FAILED COMPONENT(S)/PART(S) INFORMATION

Incident Date(s) 16-MAR-2006	Failure Mileage 105000	Failure Speed	
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ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A TIRE FAILURE

Tire Make	Tire Model (Name or Number)	Tire Size (Example P215/85R15)
DOT No. (Example: DOTM18ABC036)	☐ 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).				

07*: THE CONTACT STATED THE HEADLIGHTS AND WINDSHIELD WIPERS BECAME INOPERABLE, THEN THE VEHICLE WOULD NOT START. THE VEHICLE HAS NOT BEEN SEEN BY A MECHANIC. THE RECALL, #02V258000 CONCERNING THE IGNITION SWITCH WAS PERFORMED ON THE VEHICLE IN AUGUST 2002. THE VEHICLE IS HAVING THE SAME PROBLEM AS INDICATED IN THE RECALL. THE MANUFACTURER WAS ALERTED.

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.