



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 2006 AUG -2
(1-888-327-4236)
INTERNET:www.nhtsa.dot.gov/hotline

FOR AGENCY USE ONLY 100148

Date Received

Repository

AM 11:34
07-JUN-2006

Reference No.
10159212

OWNER INFORMATION (Type or Print)

Name [REDACTED]
Address [REDACTED]
City FORT LAUDERDALE State FL Zip Code [REDACTED]

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 representative, you must provide your name or address to the vehicle manufacturer.
Signature of Owner [REDACTED] Date 7/11/06

VEHICLE INFORMATION

17 digit Vehicle Identification Number Located at bottom of windshield on driver's side
WWWVHG [REDACTED] Make VOLKSWAGEN Model PASSAT Model Year 2002
Date Purchased 01-OCT-01 Dealer's Name and Telephone Number GUNTHER VOLKSWAGEN Engine: No: Cylinders 6 Fuel Type: Gas
Original Owner Dealer's City FORT LAUDERDALE State FL Zip Code [REDACTED]
Transmission Type AUTOMATIC Antilock Brakes Cruise Control Powertrain UNKNOWN Vehicle Component Code 121000 EXTERIOR LIGHTING:HEADLIGHTS
Multiple Failure: 1

FAILED COMPONENT(S)/PART(S) INFORMATION

Incident Date(s) 07-JUN-2006 Failure Mileage 35000 Failure Speed [REDACTED]

ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A TIRE FAILURE

Tire Make [REDACTED] Tire Model (Name or Number) [REDACTED] Tire Size (Example P215/65R15) [REDACTED]
DOT No. (Example: DOTM19ABC036) 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 in detail the crash(es), component failure(s), 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*: THE CONTACT STATED THE HEADLIGHT LENSES ARE FOGGED OVER. THE VEHICLE WAS TAKEN TO THE DEALERSHIP, WHERE IT WAS DETERMINED THE LENSES NEED TO BE REPLACED.

FAILURE DATE 11/05 MILEAGE 32,000
REPORT DATE 6/7/06 " 35,000

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)

Headlight lens failure (L & R) Photos attached

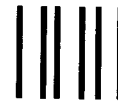
Fogging occurred shortly after original factory warranty expired by 2 weeks. Gunther Volkswagen dealer service stated extended VW warranty (Platinum) does not cover lenses. As a safety issue Florida State Atty, office (CHARUE CRIST) is looking into ALL AUTO MFGS. ^{lack of} durability in lens material * purchased via telephone prior to 10/31/05 not received via mail until ATTACH ADDITIONAL SHEETS IF NECESSARY end of November '05

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400 Seventh St., S.W. Washington, D.C. 20590

Official Business Penalty for Private Use \$300

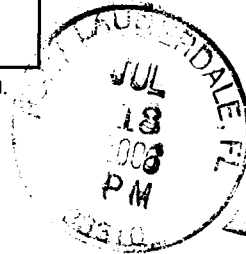


NO POSTAGE NECESSARY IF MAILED IN THE UNITED STATES

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-210
400 7th Street, SW
Washington, DC 20590



Think your vehicle has a safety defect?



If so:

Use the enclosed form to file a report.

or visit:

www.safercar.gov

or call:

Vehicle Safety Hotline
888-327-4236



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