



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 18-OCT-2006  
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**OWNER INFORMATION (Type or Print)**

Name [REDACTED] Daytime Telephone Number [REDACTED] Email Address [REDACTED]  
Address [REDACTED] Evening Telephone Number [REDACTED]  
City GLADSTONE State MO Zip Code [REDACTED]

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 \_\_\_\_/\_\_\_\_/\_\_\_\_

**VEHICLE INFORMATION**

17 digit Vehicle Identification Number Located at bottom of windshield on driver's side WP0CA298[REDACTED] Make PORSCHE Model BOXSTER Model Year 1998  
Date Purchased 25-MAY-06 Dealer's Name and Telephone Number ULTIMATE MOTOR CARS Engine: No: Cylinders 6 Fuel Type: Gas  
Original Owner  Dealer's City NORHT KANSAS CITY State MO Zip Code [REDACTED]  
Transmission Type MANUAL  Antilock Brakes  Cruise Control Powertrain REAR WHEEL DRIVE Vehicle Component Code 116100 ELECTRICAL SYSTEM:IGNITION:SWITCH  
Multiple Failure: 1

**FAILED COMPONENT(S)/PART(S) INFORMATION**

Incident Date(s) 17-OCT-2006 Failure Mileage 60000 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 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).

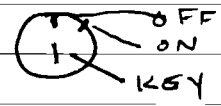
DT\*: THE CONTACT STATED WHILE ATTEMPTING TO TURN THE KEY, THE IGNITION SWITCH WOULD NOT TURN OR WOULD TURN TOO FAR CAUSING THE INSTRUMENT PANEL TO BE INOPERABLE. THERE WAS A NHTSA RECALL, # 98V113000, REGARDING THE IGNITION SWITCH. THE VEHICLE WAS NOT INCLUDED IN THE RECALL DUE TO THE VIN.

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 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)

WHEN IGN. KEY IS TURNED IN THE IGN., SOMETIMES IT WILL NEED TO BE FORCED TO THE 'ON' POSITION.



SOMETIMES THE KEY WILL GO TOO FAR, AND STAY IN INCORRECT POSITION, UNTIL DRIVER RELOCATES KEY MANUALLY.



WHEN KEY IS IN INCORRECT POSITION, CAR WILL OPERATE,

CAN I GET PORSCHE TO FIX THIS PROBLEM?

BUT SOME ACCESSORIES WON'T. THIS CAUSES SHORT CIRCUIT

ATTACH ADDITIONAL SHEETS IF NECESSARY IN SYSTEM.

DOT  
NATIONAL HIGHWAY  
TRAFFIC SAFETY ADM  
400 7TH ST SW  
WASHINGTON DC 20590  
OFFICIAL BUSINESS



NO POSTAGE  
NECESSARY  
IF MAILED  
IN THE  
UNITED STATES

**BUSINESS REPLY MAIL**  
FIRST CLASS MAIL PERMIT NO 1888 WASHINGTON DC

POSTAGE WILL BE PAID BY ADDRESSEE



US DEPARTMENT OF TRANSPORTATION  
NATIONAL HIGHWAY TRAFFIC SAFETY ADMINISTRATION  
OFFICE OF DEFECTS INVESTIGATION, NVS-210  
400 7TH ST SW  
WASHINGTON DC 20077-8214



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**

