

 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	
U.S. Department of Transportation National Highway Traffic Safety Administration				Date Received 10/17/06 8:40 AM 20-OCT-2006	
				Repository ☐ Reference No. 10171452	
OWNER INFORMATION (Type or Print)					
Name			Daytime Telephone Number		E-mail Address
Address					
City	State	Zip Code	Evening Telephone Number		
ALEXANDRIA	VA				
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 <u>10/13/06</u>					
VEHICLE INFORMATION					
17 digit Vehicle Identification Number Located at bottom of windshield on driver's side			Make	Model	Model Year
YV4SZ592561			VOLVO	XC70	2006
Date Purchased	Dealer's Name and Telephone Number			Engine:	Fuel Type:
09-NOV-05	VOLVO PRINCETON 609 882 0600			No: Cylinders 6	Gas
Original Owner	Dealer's City	State	Zip Code		
☒	LAWRENCEVILLE	NJ	08648		
Transmission Type	☒ Antilock Brakes	Powertrain	Vehicle Component Code		
AUTOMATIC	☒ Cruise Control	ALL WHEEL DRIVE	136000 VISIBILITY: WINDSHIELD WIPER/WASHER		
			Multiple Failure: 1		
FAILED COMPONENT(S)/PART(S) INFORMATION					
Incident Date(s)	Failure Mileage	Failure Speed			
17-OCT-2006	7895	65			
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	Fire	Number of Persons Injured	Number of Deaths	Reported to Police	
☐ Yes ☒ No	☐ Yes ☒ No			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 DRIVING 65 MPH ON RAINY ROAD CONDITIONS, THE WINDSHIELD WIPERS STOPPED WORKING AND IMMEDIATELY AFTER THE ENGINE STALLED AND ALL DASH BOARD INFORMATION DISAPPEARED AS WELL. NO WARNING SIGNALS ALERTED THE CONTACT PRIOR THE INCIDENT. THE VEHICLE WAS PULLED OVER AND THE EMERGENCY BRAKE HAD TO BE USED TO STOP IT BECAUSE THERE WAS NO POWER BRAKE ACTION EITHER. THE CONTACT ALSO NOTICED ONLY THE HORN AND THE EMERGENCY FLASHER LIGHTS STILL WORKED. THE DEALERSHIP TOWED THE VEHICLE, WHO REMOVED THE ELECTRONIC MODULE, HOWEVER NO RESOLUTION HAD BEEN DETERMINED YET. THE MANUFACTURER WAS ALSO CONTACTED BUT HAD NOT COMMUNICATED ANY RESOLUTION EITHER.					
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)

Without warning car was without powder and I was
fortunate to get to the shoulder of a busy interstate
without being hit

Car was repaired in accordance with attached document.

ATTACH ADDITIONAL SHEETS IF NECESSARY

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

OFFICIAL BUSINESS

BUSINESS REPLY MAIL

FIRST-CLASS MAIL PERMIT NO 1888 WASHINGTON DC

POSTAGE WILL BE PAID BY ADDRESSEE

NO POSTAGE
NECESSARY
IF MAILED
IN THE
UNITED STATES

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

www.nhtsa.gov

NHTSA

Vehicle Owner's Questionnaire (VOQ)
U.S. Department of Transportation
National Highway Traffic Safety Administration

safercar.gov

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).