



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

2007 DEC 12 PM 1:47
27-SEP-2007

Repository ☐

Reference No.
10204307

OWNER INFORMATION (Type or Print)

Name

Address

City

LOVELAND

State CO

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 ____/____/____

VEHICLE INFORMATION

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

WWWTH63B43

Make

VOLKSWAGEN

Model

PASSAT

Model Year

2003

Date Purchased
01-FEB-03

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

4 WHEEL DRIVE

Vehicle Component Code

070000 FUEL SYSTEM, GASOLINE

Multiple Failure: 14

FAILED COMPONENT(S)/PART(S) INFORMATION

Incident Date(s)
13-SEP-2007

Failure Mileage
96670

Failure Speed
0

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

☐ Yes ☒ No

Fire

☐ Yes ☒ No

Number of Persons Injured

Number of Deaths

Reported to Police

0

0

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).

TL*THE CONTACT OWNS A 2003 VOLKSWAGEN PASSAT. WHILE PARKED IN THE GARAGE, THE CONTACT SMELLED A STRONG GASEOUS ODOR COMING FROM THE VEHICLE. SHE EXAMINED THE VEHICLE AND ADJUSTED THE FUEL CAP. THE SMELL STILL LINGERED. THE CONTACT REMOVED THE VEHICLE FROM THE GARAGE AND PARKED IT ON THE STREET. THE VEHICLE WAS THEN TOWED TO THE DEALER AND THEY STATED THAT THE FUEL TANK VALVE FAILED AND THE FUEL TANK NEEDED TO BE REPLACED. NO REPAIRS HAVE BEEN MADE. THE CURRENT MILEAGE WAS 96,703 AND FAILURE MILEAGE WAS 96,670.

Repair was complete on 10-8-07. Volkswagen of America covered the cost in full. Invoice is included.

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.

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).