addition to original report

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	Repository ☐
20-FEB-2008	Reference No. 10218681

2008 MAR 25 PM 1:49

OWNER INFORMATION (Type or Print)

Name	[redacted]		
Address	[redacted]	Daytime Telephone Number [redacted]	E-mail Address
City KINGSTON	State NY	Zip Code [redacted]	Evening Telephone Number

Do you authorize NHTSA to provide a copy of this report to the manufacturer of your vehicle? ☒ YES ☐
In the absence of an a[redacted] name or address to the vehicle manufacturer.

Signature of Owner [redacted] Date 3/6/08

VEHICLE INFORMATION

17 digit Vehicle Identification Number Located at bottom of windshield on driver's side	Make	Model	Model Year
YV1TS91Z041[redacted]	VOLVO	S80	2004

Date Purchased	Dealer's Name and Telephone Number			Engine:	Fuel Type:
01-NOV-07				No: Cylinders 6	Gas
Original Owner ☐	Dealer's City	State	Zip Code		

Transmission Type		Powertrain	Vehicle Component Code
AUTOMATIC	☒ Antilock Brakes ☒ Cruise Control	FRONT WHEEL DRIVE	140000 AIR BAGS Multiple Failure: 1

FAILED COMPONENT(S)/PART(S) INFORMATION

Incident Date(s)	Failure Mileage	Failure Speed
12-FEB-2008	37000	15

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: DOTMAL9ABC036)	☐ 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	1	0	Y

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 2004 VOLVO S80. WHILE DRIVING 15-20 MPH, THE CONTACT CRASHED INTO THE REAR PASSENGER SIDE DOOR OF ANOTHER VEHICLE. THE AIR BAGS FAILED TO DEPLOY AND THE SEAT BELTS DID NOT ENGAGE. AS A RESULT, THE DRIVER STRUCK HIS HEAD ON THE WINDSHIELD AND SUFFERED HEAD AND NECK INJURIES. A POLICE REPORT WAS FILED. AS OF FEBRUARY 20, 2008, THE DEALER HAD NOT INSPECTED THE VEHICLE. THE CURRENT AND FAILURE MILEAGES WERE 37,000.

attached attached

Include, if available: Police/Fire Department Report, Photos, and Repair Invoice. ATTACH ADDITIONAL SHEETS IF NECESSARY

Page 1 of 3 Pages

New York State Department of Motor Vehicles

POLICE ACCIDENT REPORT

MV-104A (3/04)

Local Codes: UL-001816-08 / 7SU392000099

☐ AMENDED REPORT

Accident Date (Month / Day / Year)	Day of Week	Military Time	No. of Vehicles	No. Injured	No. Killed	Not Investigated at Scene ☐ / Accident Reconstructed ☐	Left Scene ☐	Police Photos ☐ Yes ☒ No
2 / 12 / 2008	Tuesday	16:52	2	1	0			

VEHICLE 1

VEHICLE 1 - Driver License ID Number: [redacted] State of Lic.: NY

Driver Name - exactly as printed on license: [redacted]

Address (Include Number and Street): [redacted] Apt. No.:

City or Town: KINGSTON State: NY Zip Code: [redacted]

Date of Birth (Month / Day / Year): [redacted] Sex: M Unlicensed: ☐ No. of Occupants: 01 Public Property Damaged: ☒

Name - exactly as printed on registration: [redacted] Sex: M Date of Birth (Month / Day / Year):

Address (Include Number and Street): [redacted] Apt. No.: Haz. Mat. Code: - Released: ☐

City or Town: KINGSTON State: NY Zip Code: [redacted]

Plate Number: [redacted] State of Reg.: NY Vehicle Year & Make: 1999 PLYM Vehicle Type: SUBN Ins. Code: 620

Ticket/Arrest Number(s):

Violation Section(s):

Check if involved vehicle is:
☐ more than 95 inches wide;
☐ more than 34 feet long;
☐ operated with an overweight permit;
☐ operated with an overdimension permit.

VEHICLE 1 DAMAGE CODES

Box 1 - Point of Impact / Box 2 - Most Damage		5[1]	5[2]
Enter up to three more damage codes	4[3]	6[4]	[5]

Vehicle Bv: PARAMOUNT Towed: To: PARAMOUNT

VEHICLE 2 ☒ BICYCLIST ☐ PEDESTRIAN ☐ OTHER PEDESTRIAN

VEHICLE 2 - Driver License ID Number: [redacted] State of Lic.: NY

Driver Name - exactly as printed on license: [redacted]

Address (Include Number and Street): [redacted] Apt. No.:

City or Town: KINGSTON State: NY Zip Code: [redacted]

Date of Birth (Month / Day / Year): [redacted] Sex: M Unlicensed: ☐ No. of Occupants: 01 Public Property Damaged: ☐

Name - exactly as printed on registration: [redacted] Sex: M Date of Birth (Month / Day / Year): [redacted]

Address (Include Number and Street): [redacted] Apt. No.: Haz. Mat. Code: - Released: ☐

City or Town: KINGSTON State: NY Zip Code: [redacted]

Plate Number: [redacted] State of Reg.: NY Vehicle Year & Make: 2004 VOLV Vehicle Type: 4DSD Ins. Code: 193

Ticket/Arrest Number(s):

Violation Section(s):

Check if involved vehicle is:
☐ more than 95 inches wide;
☐ more than 34 feet long;
☐ operated with an overweight permit;
☐ operated with an overdimension permit.

VEHICLE 2 DAMAGE CODES

Box 1 - Point of Impact / Box 2 - Most Damage		3[1]	3[2]
Enter up to three more damage codes	1[3]	2[4]	4[5]

Vehicle Bv: STAGE ONE Towed: To: STAGE ONE

Circle the diagram below that describes the accident, or draw your own diagram in space #9. Number the vehicles.

Rear End 1. | Left Turn 3. | Right Angle 4. | Right Turn 5. | Head On 7.
Sideswipe (same direction) 2. | Left Turn 0. | | Right Turn 6. | Sideswipe (opposite direction) 8.

ACCIDENT DIAGRAM

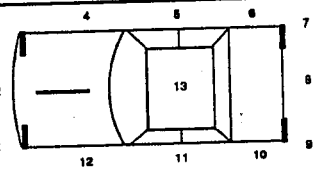
See the last page of the MV-104A for the accident diagram.

9.

Cost of repairs to any one vehicle will be more than $1000.
☐ Unknown/Unable to determine ☒ Yes ☐ No

VEHICLE DAMAGE CODING:

1-13 SEE DIAGRAM ON RIGHT.
14. UNDERCARRIAGE
15. TRAILER
16. OVERTURNED
17. DEMOLISHED
18. NO DAMAGE
19. OTHER



Reference Marker	Coordinates (if available)
	Lattitude/Northing: 585428
	Longitude/Easting: 4649852

Place Where Accident Occurred:

County ULSTER ☐ City ☐ Village ☒ Town of ULSTER

Road on which accident occurred DEER RUN RD (Route Number or Street Name)

at 1) intersecting street ALDER CT (Route Number or Street Name)

or 2) ____ feet ____ miles ☐N ☐S ☐E ☐W of ____ (Milepost, Nearest intersecting Route Number or Street Name)

Accident Description/Officer's notes

V1 traveling west on Alder Court and approached the intersection with Deer Run Rd. While V1 was attempting to cross Deer Run Rd V2 traveling south on Deer Run Road, struck V1 in the intersection. V1 turned 180 degrees and came to final rest in a ditch after striking a the sign post for Deer Run Rd and Popular Ct. It should be noted, at said intersection there are no posted traffic control signs.
PROPERTY DAMAGE BY VEHICLE #01 - SIGN POST, TOWN OF ULSTER 1 TOWN HALL DRIVE LAKE KATRINE

USE COVER SHEET: N

ALL INVOLVED

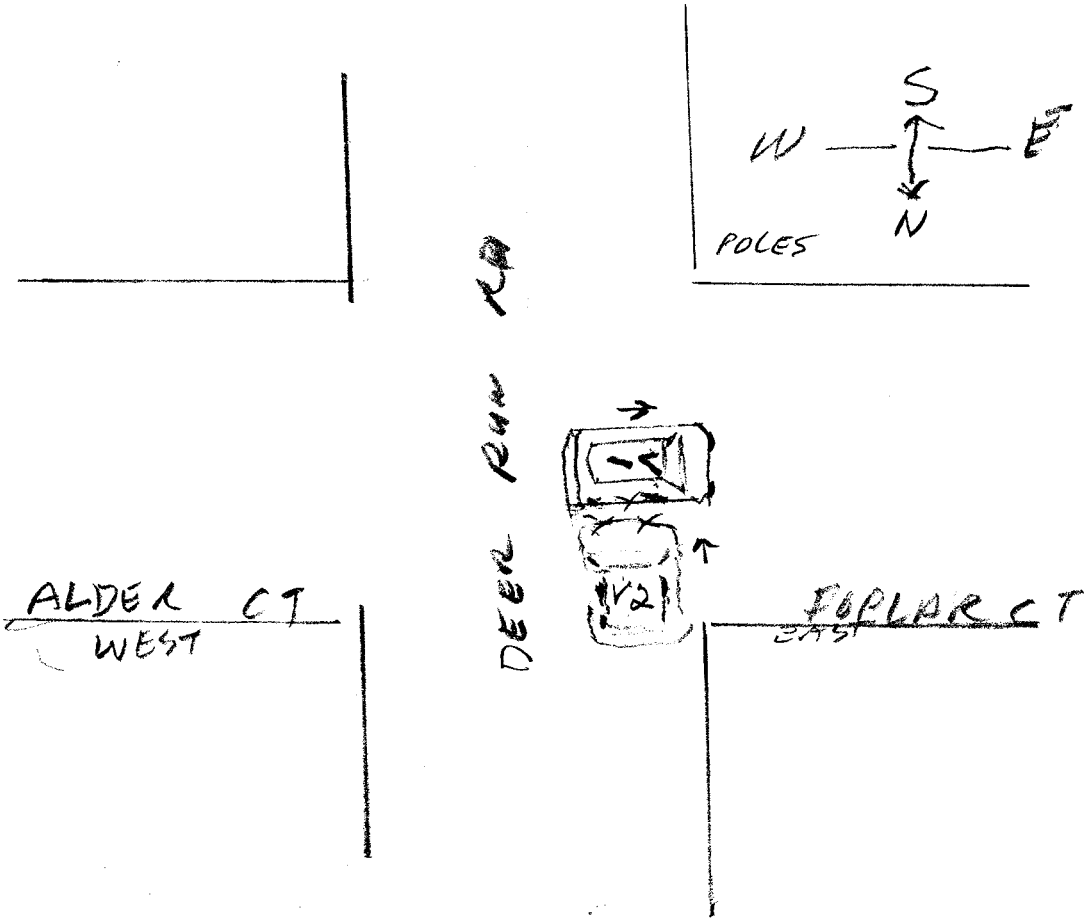
	8	9	10	11	12	13	14	15	16	17 BY	TO 18	Names of all Involved	Date of Death Only
A	1	1	4	1	31	M	-	-	-			[redacted]	
B	2	1	4	1	69	M	01	12	6	11350ET	5501		
C													
D													
E													
F													

Officer's Rank and Signature	Badge/ID No.	NCIC No.	Precinct/Post Troop/Zone	Station/Beat Sector	Reviewing Officer	Date/Time Reviewed
Officer [signature]	124	05595	F3	ULST	Kilfoyle, James L. Sgt	2/13/2008 06:27

Print Name in Full: Robert J. Sykes

MV-104
ATTACHMENT

[redacted]
KINGSTON, N.Y [redacted]
CLAIM # [redacted]



V1 TRAVELING WEST ON ALDER COURT PROCEEDS THRU INTERSECTION ACROSS DEER RUN RD TO POPLAR CT. WITHOUT SLOWING DOWN OR STOPPING AND WAS STRUCK BY V2 HEADING SOUTH ON DEER RUN RD ~~[illegible]~~ CAUSING V1 to COME TO A FINAL REST, IN DITCH AFTER TURNING 180 DEGREES AND DAMAGING SIGN POST for Deer Run Rd and POPLAR court.

NO POSTED TRAFFIC CONTROL SIGNS

PROPERTY DAMAGE BY V1 (SIGN POST) DEER RUN & POPLAR CT

ANY QUESTIONS; PLEASE CALL: [redacted]

* 21 - corrected: DEER RUN RD IS RIGHT OF WAY

Ms. Anne Belec
CEO President
Volvo North America LLC
1 Volvo Dr.
Rockleigh, New Jersey 07647-0914

[redacted]

Kingston NY [redacted]

VIN #YV1T591Z041[redacted]

March 4, 2008

Dear Ms. Belec:

I purchased my 2004 S-80 Certified Volvo at Hudson Valley Volvo, Wappingers Falls, NY on 8/07. This is the second Volvo I have owned and the reason for the purchase with Volvo's safety record. As a practicing pharmacist I drive 3000 miles per month and it is imperati to me to have a safe vehicle.

On 2/12/08 I was involved in and MVA in a bad snow storm. I hit a van coming out of a court. At the time of impact my seat belt did not restrain me and the front airbag did not deploy. My head hit the windshield and I suffered severe whiplash due to the impact. I was taken by ambulance to the Kingston Hospital and was treated in the E.R.. On 2/14/08 I was seen at Albany Medical Center and was diagnosed with a fractured C-7 and post concussion syndrome. I am now out on disability and undergoing physical therapy for my injury.

I am grossly disappointed in Volvo's response to this situation and have spoken to the dealership and Volvo of North America with no satisfaction. It is my contention that the SRS system should have protected me and my head should not have hit the windshield. The damage to the car is $13,100.

Thanking you for your prompt attention to this matter, I remain,

Sincerely,

[redacted]

02/15/2008 at 05:06 PM
57450

Job Number:

JOHNSON FORD, INC.
License #:R7098820 Federal ID #:221024612
"JOHNSON AUTO BODY"
144 RTE 28
KINGSTON, NY 12401
(845)331-6200 Fax: (845)338-5312

PRELIMINARY ESTIMATE

Written By: EDWARD BOWEN #1A-955142
Adjuster:

Insured: [redacted]
Owner:
Address:

Day:
Evening:

Inspect Location:

Insurance Company:

Claim #
Policy #
Deductible:
Date of Loss:
Type of Loss:
Point of Impact: 12. Front

Days to Repair

2004 VOLV S80 T-6 6-2.9L-T 4D SED Int:
VIN: YV1TS91Z041[redacted] **Lic:** **Prod Date:** **Odometer:**

Air Conditioning	Rear Defogger	Tilt Wheel
Cruise Control	Telescopic Wheel	Intermittent Wipers
Keyless Entry	Theft Deterrent/Alarm	Steering Wheel Controls
Body Side Moldings	Wood Interior Trim	Dual Mirrors
Console/Storage	Electric Glass Sunroof	Traction Control
Fog Lamps	Clear Coat Paint	Power Steering
Power Brakes	Power Windows	Power Driver Seat
Power Passenger Seat	Power Mirrors	Power Trunk/Tailgate
AM Radio	FM Radio	Stereo
Cassette	CD Player	Anti-Lock Brakes (4)
Driver Air Bag	Passenger Air Bag	Front Side Impact Air Bag
4 Wheel Disc Brakes	Leather Seats	Automatic Transmission
Aluminum/Alloy Wheels		

NO.	OP.	DESCRIPTION	QTY	EXT. PRICE	LABOR	PAINT
1		FRONT BUMPER			3.0	
2		O/H bumper assy	1	765.75	Incl.	2.4
3	Repl	Bumper cover w/upper molding, w/lamp washer black sapphir				1.0
4		Add for Clear Coat			0.3	
5		Add for fog lamps			0.4	
6		Add for h'lamp washer	1	7.30	Incl.	
7	Repl	RT Guide	1	7.30	Incl.	
8	Repl	LT Guide	1	125.88	Incl.	
9	Repl	Absorber				

Job Number:

:06 PM

PRELIMINARY ESTIMATE

2004 VOLV S80 T-6 6-2.9L-T 4D SED Int:

	OP.	DESCRIPTION	QTY	EXT. PRICE	LABOR	PAINT
J		Repl Support	1	115.43	Incl.	
11		Repl RT Support rivet	1	1.40	Incl.	
12		Repl LT Support rivet	1	1.40	Incl.	
13		Repl Impact bar	1	323.65	Incl.	
14		Repl Emblem	1	67.82	Incl.	
15		FRONT LAMPS				
16		Repl RT Headlamp assy	1	378.38	0.4	
17		Aim headlamps			0.5	
18		Repl LT Headlamp assy	1	378.38	0.4	
19		Repl RT Wiper motor	1	214.18	0.8	
20		Repl LT Park/turn lamp	1	50.80	Incl.	
21		RADIATOR SUPPORT				
22		Repl Radiator support	1	397.43	4.0	
23		Evacuate & recharge			m 1.4	
24		Refrigerant recovery			m 0.4	
25		Repl RT Side panel	1	62.48		
26		Repl LT Side panel	1	62.48		
27		Repl RT Plate	1	31.77	2.5	
28		Repl LT Plate	1	31.77	2.5	
29		COOLING				
30	R&I	Radiator w/o turbo			m Incl.	
31	R&I	Fan assy from CH# 116811			m Incl.	
32		AIR CONDITIONER & HEATER				
33	R&I	Condenser			m 1.9	
34		HOOD				
35		Repl Hood	1	866.24	1.0	2.6
36		Add for Clear Coat				1.0
37		Add for Underside(Complete)				1.4
38		Add for Clear Coat				0.3
39		Repl Insulator retainer	10	14.00	Incl.	
40		Repl RT Hinge	1	59.60	0.3	0.3
41		Repl LT Hinge	1	59.60	0.3	0.3
42		Repl Safety catch	1	23.40	Incl.	
43		FENDER				
44		Repl RT Fender	1	401.00	2.5	2.2
45		Overlap Major Adj. Panel				-0.4
46		Add for Clear Coat				0.4
47		Add for Edging				0.5
48		Add for Clear Coat				0.1
49		Deduct for Overlap			-0.5	
50		Repl LT Fender	1	401.00	2.5	2.2
51		Overlap Major Adj. Panel				-0.4
52		Add for Clear Coat				0.4
53		Add for Edging				0.5
54		Add for Clear Coat				0.1
55		Deduct for Overlap			-0.5	
56		Repl RT Stay	1	34.04	1.0	0.4
57		Repl LT Stay	1	15.25	1.0	0.4

PRELIMINARY ESTIMATE

2004 VOLV S80 T-6 6-2.9L-T 4D SED Int:

	OP.	DESCRIPTION	QTY	EXT. PRICE		LABOR	PAINT
						0.2	
8	R&I	RT Body side mldg primed				0.2	
59	R&I	LT Body side mldg primed				0.2	
60	R&I	Mud guard				0.2	
61	R&I	Mud guard	1	640.17	s	7.5	1.2
62	Repl	RT Apron assy	1	165.41	s	3.5	0.5
63	Repl	RT Upper rail					-0.2
64		Overlap Minor Panel				-2.5	
65		Deduct for Overlap	1	103.52	s	3.5	0.5
66	Repl	LT Front panel					-0.2
67		Overlap Minor Panel	1	248.69			
68	Repl	LT Apron reinf	1	165.41	s	3.5	0.5
69	Repl	LT Upper rail					-0.2
70		Overlap Minor Panel					
71		WINDSHIELD				Incl.	
72	R&I	Reservoir					
73		ENGINE			m	Incl.	
74	R&I	Air cleaner assy					
75		FRONT DOOR					1.0
76	Blnd	LT Outer panel				0.3	
77	R&I	LT Body side mldg primed				1.0	
78	R&I	LT Mirror outside w/illumination w/o folding				0.4	
79	R&I	LT Handle, outside				0.4	
80	R&I	LT R&I trim panel					1.0
81	Blnd	RT Outer panel				0.3	
82	R&I	RT Body side mldg primed				0.3	
83	R&I	RT Belt w'strip				1.0	
84	R&I	RT Mirror outside w/illumination w/o folding				0.4	
85	R&I	RT Handle, outside				0.4	
86	R&I	RT R&I trim panel					
87#		Set up and Measure	1			2.5 F	1.0
88#	Refn	Color sand and buff				7.0 F	
89#	Rpr	Unibody Alignment	1	25.00 T			
90#		Wash and vacuum for delivery	1	12.00 T			
91#		Flex Additive	1	12.00 T			
92#		Antifreeze	1	15.00 T			
93#		Freon R134	1	15.00			
94#	Repl	Undercoating	1	15.00 T			
95#	Repl	Urethane Seam Sealer	1	506.00 T			
96#	Subl	Paid out towing				0.2	
97#	Rpr	Remove adheasive	1	2.50 T		0.2	
98#	Repl	Moulding adheasive	1	5.00 T			
99#	Repl	Weld thru primer				1.0	
100#	Rpr	MASK JAMBS					
101#		Hazardous Waste Removal	1	3.50 T			
		Subtotals ==>		6831.93		57.8	20.8

Job Number:

,5:06 PM

PRELIMINARY ESTIMATE

2004 VOLV S80 T-6 6-2.9L-T 4D SED Int:

		6235.93
Parts		2415.00
Body Labor	48.3 hrs @ $ 50.00/hr	1040.00
Paint Labor	20.8 hrs @ $ 50.00/hr	617.50
Frame Labor	9.5 hrs @ $ 65.00/hr	520.00
Paint Supplies	20.8 hrs @ $ 25.00/hr	596.00
Sublet/Misc.		
		$11424.43
SUBTOTAL		
Sales Tax	$11424.43 @ 8.0000%	913.95
GRAND TOTAL		$12338.38
ADJUSTMENTS:		0.00
Deductible		
		$ 0.00
CUSTOMER PAY		$12338.38
INSURANCE PAY		

THE ABOVE IS AN ESTIMATE BASED ON OUR INSPECTION AND DOES NOT INCLUDE ANY ADDITIONAL DAMAGE WHICH MAY BE FOUND AFTER THE WORK HAS BEEN STARTED. OCCASIONALLY, WORN OR DAMAGED PARTS MAY BE DISCOVERED WHICH WERE NOT EVIDENT ON FIRST INSPECTION. PARTS PRICES ARE CURRENT AND SUBJECT TO CHANGE. Please note that you may be subject to a parts re-stocking fee, and / or administrative charges for any cancelled appointments where parts have been ordered and must be returned.

ANY PERSON WHO KNOWINGLY AND WITH INTENT TO DEFRAUD ANY INSURANCE COMPANY OR OTHER PERSON FILES AN APPLICATION FOR COMMERCIAL INSURANCE OR A STATEMENT OF CLAIM FOR ANY COMMERCIAL OR PERSONAL INSURANCE BENEFITS CONTAINING ANY MATERIALLY FALSE INFORMATION, OR CONCEALS FOR THE PURPOSE OF MISLEADING, INFORMATION CONCERNING ANY FACT MATERIAL THERETO, AND ANY PERSON WHO, IN CONNECTION WITH SUCH APPLICATION OR CLAIM, KNOWINGLY MAKES OR KNOWINGLY ASSISTS, ABETS, SOLICITS OR CONSPIRES WITH ANOTHER TO MAKE A FALSE REPORT OF THE THEFT, DESTRUCTION, DAMAGE OR CONVERSION OF ANY MOTOR VEHICLE TO A LAW ENFORCEMENT AGENCY, THE DEPARTMENT OF MOTOR VEHICLES OR AN INSURANCE COMPANY, COMMITS A FRAUDULENT INSURANCE ACT, WHICH IS A CRIME, AND SHALL ALSO BE SUBJECT TO A CIVIL PENALTY NOT TO EXCEED FIVE THOUSAND DOLLARS AND THE VALUE OF THE SUBJECT MOTOR VEHICLE OR STATED CLAIM FOR EACH VIOLATION.