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: JUN 17 2011
12-JAN-2011

Repository ☐

Reference No. 10376435

OWNER INFORMATION (Type or Print)

Name [redacted]

Address [redacted]

City: MARGATE | State: FL | Zip Code: [redacted]

Daytime Telephone Number [redacted]

Evening Telephone Number [redacted]

E-mail Address

The information you provide will be used to identify potential safety-related defects. We may share your information with the applicable vehicle manufacturer during an investigation or recall in accordance with the routine uses described in the agency's Privacy Act notice. See 49 FR 53971 (Sep. 3, 2004).

VEHICLE INFORMATION

17 digit Vehicle Identification Number Located at bottom of windshield on driver's side	Make	Model	Model Year
WVWAD63B15P[redacted]	VOLKSWAGEN	PASSAT	2005

Date Purchased	Dealer's Name and Telephone Number		Engine:	Fuel Type:
11/30/2005	Pompano Imports DBA Vista Volkswagen 800-969-1144		No: Cylinders	
Original Owner ☑	Dealer's City: Pompano Beach	State: FL / Zip Code: 33062		

Transmission Type	☐ Antilock Brakes ☐ Cruise Control	Powertrain	Multiple Failure:	Incident Date(s)
				10-SEP-2010

FAILED COMPONENT(S)/PART(S) INFORMATION

Vehicle Component Codes: 021000 SUSPENSION: FRONT, 022000 SUSPENSION: REAR, 110000 ELECTRICAL SYSTEM, 106000 POWER TRAIN: AXLE ASSEMBLY	Failure Mileage	Failure Speed
	14015	10

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			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 2005 VOLKSWAGEN PASSAT. THE CONTACT STATED THAT THE VEHICLE SUDDENLY STALLED WHILE SHE WAS DRIVING AT A VERY LOW SPEED; SHE ALSO COULD NOT SHIFT INTO REVERSE OR DRIVE. THE VEHICLE WAS TOWED TO AN AUTHORIZED DEALER WHO STATED THAT THE FAILURE WAS LOCATED AT THE FRONT AND REAR AXLE. THE VEHICLE WAS REPAIRED AT A LOCAL REPAIR SHOP. THE FAILURE MILEAGE WAS 14,015 AND THE CURRENT MILEAGE WAS 18,000.

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