



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
APR 19 2012

Repository ☐

28-FEB-2012

Reference No.
10449528

OWNER INFORMATION (Type or Print)

Name **[REDACTED]**
Address **[REDACTED]**
City **CUMMINGS** State **GA** Zip Code **[REDACTED]**

Daytime Telephone Number **[REDACTED]** E-mail Address **[REDACTED]**
Evening Telephone Number **[REDACTED]**

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
1VWBPTA3XEC [REDACTED] Make **VOLKSWAGEN** Model **PASSAT** Model Year **2012**
Date Purchased **1-2-12** Dealer's Name and Telephone Number **GUNTHER-** Engine: No: Cylinders **5** Fuel Type: **GAS**
Original Owner ☒ Dealer's City **Buford** State **GA** Zip Code **30519**
Transmission Type **AUTO** ☒ Antilock Brakes Powertrain **AUTOMATIC** Multiple Failure: **YES** Incident Date(s) **02-JAN-2012**
☒ Cruise Control **CONTINUOUS**

FAILED COMPONENT(S)/PART(S) INFORMATION

Vehicle Component Code: 180000 VEHICLE SPEED CONTROL Failure Mileage **10 To** Failure Speed **5-60**
CONSENT

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 **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 2012 VOLKSWAGEN PASSAT. THE CONTACT STATED THAT WHEN THE ACCELERATOR PEDAL WAS DEPRESSED, THE VEHICLE WOULD HESITATE BEFORE ACCELERATING. THE VEHICLE WAS TAKEN TO THE DEALER WHERE THE DEALER ADVISED THE CONTACT THAT THE FAILURE WAS COMMON, BUT THERE WAS NOTHING THAT COULD BE DONE TO FIX THE PROBLEM. THE DEALER TEST DROVE ANOTHER VEHICLE OF THE SAME YEAR AND MODEL AND THE FAILURE ALSO OCCURRED IN THE TEST VEHICLE. THE CONTACT STATED THAT THE FAILURE WOULD ONLY OCCUR INTERMITTENTLY. THE VEHICLE WAS NOT REPAIRED. THE FAILURE MILEAGE WAS 10 AND THE CURRENT MILEAGE WAS 3,500.

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.

Narrative Description of Incident(s), Failure(s), Crash(es), and Injury(ies)

I HAVE FOUND THAT WHEN USING MY
LEFT FOOT TO BRAKE THAT IT SEEMS TO CONFUSE
THE "DRIVE BY WIRE" ACCELERATOR. THIS OCCURS
MOSTLY AT LOW SPEED WHEN STARTING TO ACCELERATE,
THE DELAY CAN BE 3-4 SECONDS - WHEN USING
MY RIGHT FOOT TO BRAKE THE PROBLEM DOES NOT OCCUR.
IT CAN BE VERY SCARY IF YOU ARE NOT EXPECTING
THE DELAY AND I BELIEVE SHOULD BE CORRECTED.

ATTACH ADDITIONAL SHEETS IF NECESSARY

I AM GOING TO TELL THE MANUFACTURER WHAT I
THINK IS THE PROBLEM.

U.S. Department
of Transportation

**National Highway
Traffic Safety
Administration**

1200 New Jersey Avenue SE,
Washington, D.C. 20077-9382

Official Business
Penalty for Private Use \$300

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
1200 New Jersey Avenue SE.
Washington, D.C. 20077-9382**



**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**



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



202832

22634

Gunther

VOLKSWAGEN

MALL OF GEORGIA



3711 BUFORD DR., BUFORD, GA 30519
 SERVICE (678) 745-9920 · FAX (678) 745-9925
 E-MAIL: service@gunthervwbuford.com
 www.gunthervwbuford.com

INVOICE

PAGE 1

CUMMING, GA

HOME: [REDACTED] CONT:N/A

BUS: [REDACTED] CELL:

SERVICE ADVISOR: 1057 MATT WILLIAMS

COLOR	YEAR	MAKE/MODEL	VIN		LICENSE	MILEAGE IN / OUT	TAG
REFLEX SIL 12		VOLKSWAGEN PASSAT	1VWBP7A3XCO			828/831	T4522
DEL. DATE	PROD. DATE	WARR. EXP.	PROMISED	PO NO.	RATE	PAYMENT	INV. DATE
02JAN12 DD			WAIT 13JAN12		0.00	CASH	13JAN12
R.O. OPENED		READY	OPTIONS: STK:V12678 DLR:405110 ENG:2.5_Liter_F.I.				
07:22 13JAN12		08:46 13JAN12	TRN:AT				

LINE	OPCODE	TECH	TYPE	HOURS	LIST	NET	TOTAL
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A CUSTOMER STATES CAR SEEMS TO HESITATE UNDER ACEL , AS YOU PUSH ACEL
 PEDAL FURTHER DONE CAR SUDDENS TO TAKE OFF. CHECK AND REPORT

CAUSE: NO PROBLEM FOUND

01 GENERAL REPAIR

PARTS:	1017	C				0.00	0.00
	0.00	LABOR:	0.00	OTHER:	0.00	TOTAL LINE A:	0.00

,,, 831 NO PROBLEM FOUND DURING TEST DRIVE FOUND VEHICLE PREFORMED AS
 ,,,, DESIGNED, SCANNED FOR FAULTS CODES AND FOUND NO IN THE ENGINE COMPUTER
 ,,,, OR TRANSMISSION

B PERFORM COURTESY VEHICLE INSPECTION - CHECK & ADJUST TIRE PRESSURES,
 TOP OFF ALL UNDER HOOD FLUIDS, CHECK BELTS & HOSES, CLEAN AND
 CHECK WIPERS, CHECK INTERIOR & EXTERIOR LIGHTS

CAUSE: COURTESY CHECK

01100000 COURTESY VEHICLE CHECK

1017 VVW3

(N/C)

FC: 011055 TX2

PART#:

COUNT:

CLAIM TYPE: 1MA

AUTH CODE:

01100

PARTS:	0.00	LABOR:	0.00	OTHER:	0.00	TOTAL LINE B:	0.00
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,,, 831 COURTESY CHECK TEST DROVE VEHICLE, TOPPED OFF FLUIDS, CHECKED
 ,,,, LIGHTS, CHECKED BATTERY, CHECKED TIRE PRESSURES

C COMPLIMENTARY WASH AND VACUUM - Includes Exterior Wash, Interior
 vacuum and Chamois dry

CAUSE: COMPLIMENTARY WITH ANY SERVICE OR REPAIR

SERWAS COMPLIMENTARY WASH AND VACUUM - Includes
 Exterior Wash, Interior vacuum and Chamois
 dry

IF YOU HAVE ANY QUESTIONS REGARDING YOUR
 SERVICE INVOICE, PLEASE CONTACT YOUR SERVICE
 ADVISOR AND THEY WILL BE HAPPY TO ASSIST YOU.

CUSTOMER HEREBY ACKNOWLEDGES RECEIPT OF
 ABOVE MENTIONED VEHICLE AND RECEIPT OF INVOICE
 HEREOF.

X CUSTOMER SIGNATURE

STATEMENT OF DISCLAIMER

The factory warranty constitutes all of the warranties with respect to the sale of this item/items. The Seller hereby expressly disclaims all warranties, either express or implied, including any implied warranty of merchantability or fitness for a particular purpose. Seller neither assumes nor authorizes any other person to assume for it any liability in connection with the sale of this item/items.

DESCRIPTION	TOTALS
LABOR AMOUNT	
PARTS AMOUNT	
GAS, OIL, LUBE	
SUBLET AMOUNT	
MISC. DEDUCTIONS	
TOTAL CHARGES	
LESS INSURANCE	
SALES TAX	
PLEASE PAY THIS AMOUNT	

CUSTOMER COPY