 <p>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</p>		FOR AGENCY USE ONLY 100148 Date Received JUN 12 2012 07-MAY-2012 Repository <input type="checkbox"/> Reference No. 10457713	
U.S. Department of Transportation National Highway Traffic Safety Administration			
OWNER INFORMATION (Type or Print)			
Name		Daytime Telephone Number	E-mail Address
Address		Evening Telephone Number	
City SAN LEANDRO	State CA	Zip Code	
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
WVWGG83A9VB		VOLKSWAGEN	PASSAT
Model Year	Date Purchased	Dealer's Name and Telephone Number	Engine:
1997	3-1-2005		No: Cylinders
Fuel Type:	Original Owner	Dealer's City	State
DIESEL	<input type="checkbox"/>		CA
Zip Code	Transmission Type	Antilock Brakes	Powertrain
	MANUAL 5 SPEED	<input checked="" type="checkbox"/>	REAR WHEEL DRIVE
Multiple Failure:	Cruise Control	Incident Date(s)	
N/A	<input checked="" type="checkbox"/>	05-MAY-2012	
FAILED COMPONENT(S)/PART(S) INFORMATION			
Vehicle Component Code: 110000 ELECTRICAL SYSTEM		Failure Mileage	Failure Speed
		200000	
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)	<input type="checkbox"/> Original Equipment	Failure Location:	
	<input type="checkbox"/> Prior Repair		
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
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	0	0
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 1997 VOLKSWAGEN PASSAT TDI. THE CONTACT STATED THAT A FIRE ERUPTED SPONTANEOUSLY INSIDE THE DASHBOARD WHICH CAUSED ALL OF THE WIRES TO MELT AND THE WINDSHIELD TO FRACTURE. THE FIRE DEPARTMENT WAS CONTACTED WHO DETERMINED THAT THE FIRE STARTED IN THE AREA WHERE THE IGNITION WAS LOCATED. NO INJURIES WERE REPORTED. THE VEHICLE WAS NOT TAKEN TO THE DEALER. THE MANUFACTURER WAS NOT MADE AWARE OF THE FAILURE. THE VEHICLE WAS NOT REPAIRED. THE VIN WAS NOT AVAILABLE. THE FAILURE AND CURRENT MILEAGE WAS 200,000. THE FIRE OCCURED IN THE REGION OF THE IGNITION. THE IGNITION AND LOCKING COMPONENTS WERE SERVICE/REPLACE/REMOVED 15 DAYS BEFORE THE FIRE. OAKLAND FIRE DEPT. INSPECTION DETERMINING THAT THE FIRE STARTED FROM THE IGNITION. MY INSURANCE BELIEVES NEGLIGENT SERVICE			
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.			

CAUSED THE FIRE.

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

ON MAY 5, 2012 I PARKED MY CAR ON THE EMPLOYEE PARKING LOT OF MY WORK (USPS) AROUND 6:20 AM. WHEN I WAS OFF FROM WORK AND WHEN TO MY CAR TO LEAVE MY WORK PREMISES I OPENED THE DRIVER SIDE OF MY CAR AND DISCOVERED MY CAR BURNED INSIDE. THE FIRE WAS ALREADY OUT. (THIS HAPPENED AROUND 3:30PM). I CALLED THE OAKLAND FIRE DEPARTMENT.

ATTACH ADDITIONAL SHEETS IF NECESSARY

U.S. Department of Transportation

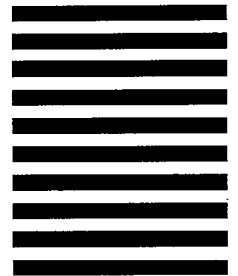
National Highway Traffic Safety Administration

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

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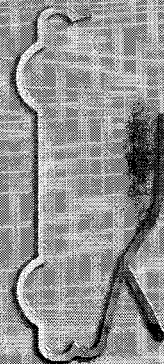
FIRST-CLASS MAIL PERMIT NO. 1888 WASHINGTON, DC

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 (VOQ)
U.S. Department of Transportation
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