

INFORMATION ACT (FOIA), 5 U.S.C. 552(B)(6) 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 JUL 10 2013 10-JUN-2013		Repository <input type="checkbox"/> Reference No. 10516072
OWNER INFORMATION (Type or Print)				
Name		Daytime Telephone Number		E-mail Address
Address		Evening Telephone Number		
City	State	Zip Code		
MANFIELD	TX			
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
WVWTH63B12P		VOLKSWAGEN	PASSAT	2002
Date Purchased	Dealer's Name and Telephone Number		Engine: No: Cylinders	Fuel Type:
			6	GAS
Original Owner	Dealer's City	State	Zip Code	
<input type="checkbox"/>				
Transmission Type	<input type="checkbox"/> Antilock Brakes	Powertrain	Multiple Failure:	Incident Date(s)
AUTO	<input type="checkbox"/> Cruise Control	4WD 4-MOTION		01-OCT-2012
FAILED COMPONENT(S)/PART(S) INFORMATION				
Vehicle Component Code: FUEL/PROPULSION SYSTEM (PWS)			Failure Mileage	Failure Speed
			109000	
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: DOTM4L9ABC036)		<input type="checkbox"/> Original Equipment <input type="checkbox"/> 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 <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Fire <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Number of Persons Injured 0	Number of Deaths 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 2002 VOLKSWAGEN PASSAT. THE CONTACT STATED THAT AFTER REFUELING, FUEL SPILLED OUT OF THE FUEL TANK. THE VEHICLE WAS NOT REPAIRED; THE MANUFACTURER WAS CONTACTED AND INFORMED THE CONTACT THAT THE VEHICLE WAS NOT INCLUDED IN NHTSA CAMPAIGN NUMBER: 08V156000 (FUEL SYSTEM, GASOLINE). THE FAILURE MILEAGE WAS 109,000.				
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)

THIS VEHICLE FALLS SQUARELY WITHIN 08V156000 PAID
SHOWS THE SYMPTOMS DESCRIBED IN 08V156000. I
CONTACTED VW OF AMERICA AND HAVE BEEN TOLD I
HAVE NO COVERAGE. THIS IS A DANGEROUS FLAW
WHEN GAS LEAKS OUT INTO MY GARAGE OR THE GROUND
WHEN PARKED ON A HILL. FUEL LEAKS ON THE BACK
OF THE CAR ON RIGHT + LEFT. A ROLLOVER ACCIDENT
COULD BE FATAL DUE TO THIS FLAW.

ATTACH ADDITIONAL SHEETS IF NECESSARY

U.S. Department
of Transportation

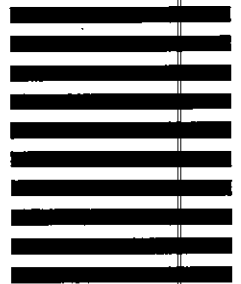
National Highway
Traffic Safety
Administration

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

Official Business
Penalty for Private Use \$300



NO POSTAGE
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IF MAILED
IN THE
UNITED STATES



BUSINESS REPLY MAIL

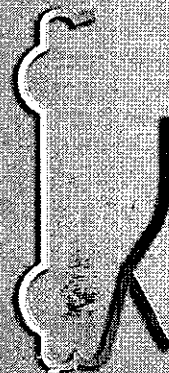
FIRST-CLASS MAIL PERMIT NO. 1888 WASHINGTON, DC

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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
National Highway Traffic Safety Administration