

JUL 25 2014

 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		NO. FOR AGENCY USE ONLY 100148	
		Date Received 14-MAY-2014	Repository ☐ Reference No. 10588275
OWNER INFORMATION (Type or Print)		Daytime Telephone Number	
Name [REDACTED]		E-mail Address	
Address [REDACTED]		Evening Telephone Number	
City NEW HAVEN	State CT	Zip Code [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 WWWBD63B85P [REDACTED]		Make VOLKSWAGEN	Model PASSAT
		Model Year 2005	
Date Purchased 3-11-14	Dealer's Name and Telephone Number VASIL ARTIMOR		Engine: No: Cylinders
Original Owner ☐	Dealer's City 377 Boston Post Milford	State CT	Zip Code 06460
Transmission Type ☐ Antilock Brakes ☐ Cruise Control	Powertrain	Multiple Failure:	Incident Date(s) 30-APR-2014
FAILED COMPONENT(S)/PART(S) INFORMATION			
Vehicle Component Code: 100000 POWER TRAIN		Failure Mileage	Failure Speed 60
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 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 2005 VOLKSWAGEN PASSAT. THE CONTACT STATED WHILE DRIVING 60 MPH, THERE WAS AN INCREASE IN ENGINE RPMs AND THE VEHICLE STALLED WITHOUT ANY WARNING. THE VEHICLE WAS TAKEN TO AN INDEPENDENT MECHANIC WHERE THE TECHNICIAN DIAGNOSED THAT THE TRANSMISSION WAS DEFECTIVE AND NEEDED TO BE REPLACED. THE MANUFACTURER WAS NOT NOTIFIED OF THE FAILURE. THE VEHICLE WAS REPAIRED. THE FAILURE MILEAGE WAS UNKNOWN. THE CURRENT MILEAGE WAS 155,000. RK			
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.			

New Haven Ct

HARTFORD CT 061

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