


**INFORMATION Redacted PURSUANT TO THE FREEDOM OF
INFORMATION ACT (FOIA), 5 U.S.C. 552(B)(6)**

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|  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 07-JUL-2015 | | Repository <input type="checkbox"/> Reference No. 10732397 | | |
| OWNER INFORMATION (Type or Print) | | | | | |
| Name | | Daytime Telephone Number | | E-mail Address | |
| Address | | | | | |
| City BRONX | State NY | Zip Code | | Evening Telephone Number | |
| <i>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).</i> | | | | | |
| VEHICLE INFORMATION | | | | | |
| 17 digit Vehicle Identification Number Located at bottom of windshield on driver's side 5UXZV8C52B | | Make BMW | Model X5 5.0 | Model Year 2011 | |
| Date Purchased 04/26/2014 | Dealer's Name and Telephone Number BERGEN CAR COMPANY 973 928-6300 | | Engine: No: Cylinders 8 | Fuel Type: Gas | |
| Original Owner <input type="checkbox"/> 2 | Dealer's City NEW JERSEY | State NJ | Zip Code 07644 | | |
| Transmission Type | <input type="checkbox"/> Antilock Brakes | Powertrain | Multiple Failure: 7 | Incident Date(s) 03-JUL-2015 | |
| | <input type="checkbox"/> Cruise Control | | | | |
| FAILED COMPONENT(S)/PART(S) INFORMATION | | | | | |
| Vehicle Component Code: ENGINE (PWS) | | | Failure Mileage 70000 | Failure Speed 65 | |
| 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: DOTM9ABC036) | <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 | | | | | |
| <i>(Please describe in detail the incident(s), Failure(s), Crash(es), and injury(ies).)</i> | | | | | |
| 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). | | | | | |
| I WAS DRIVING AT THE HALLWAY AT 65MRP AND THE CARS SHURF THE POWER I ALMOST CRASH OTHER CARS THE CAR WENT ENGINE REDUCE POWER LIGHT ON I PUT OVER I WAIT 10 MINUTO I STAR THE CAR NOW THE CAR LOOK OK I WENT BACK HOME AND IS HAPPENED AGAIN 09/15/2015 UNTIL NOW THE CAR IS FAILING IS BEEN IN THE SHOP NOW 4 TIMES AND THEY DON'T KNOW WHAT IS THE PROBLEM THE CAR IS NOT SAFE TO DRIVE THE PROBLEM IS FROM THE MANUFACTURER THE ENGINE IS N63 IM WORRIED ABOUT SOMETHING HAPPEN WHILE IM DRIVING THE CAR WITH MY FAMILY | | | | | |
| 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 for... | | | | | |