


## INFORMATION Redacted PURSUANT TO THE FREEDOM OF

 U.S. Department of Transportation National Highway Traffic Safety Administration		<b>INFORMATION ACT (FOIA), 5 U.S.C. 552(B)(6)</b> DOT Auto Safety Hotline <b>Vehicle Owner's Questionnaire</b> <b>To Report Vehicle Safety Defects</b> 1-888-DASH-2-DOT (1-888-327-4236) INTERNET:www.nhtsa.dot.gov/hotline		Date Received 31-JUL-2015 <b>SEP 11 2015</b>		Repository <input type="checkbox"/> Reference No. 10745257	
<b>OWNER INFORMATION (Type or Print)</b>							
Name		Address		City		State	
[REDACTED]		[REDACTED]		MANKATO		MN	
Zip Code		Daytime Telephone Number		Evening Telephone Number		E-mail Address	
[REDACTED]		[REDACTED]		[REDACTED]		[REDACTED]	
<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>							
<b>VEHICLE INFORMATION</b>							
17 digit Vehicle Identification Number Located at bottom of windshield on driver's side		Make		Model		Model Year	
3VW217AU1FM [REDACTED]		VOLKSWAGEN		GOLF		2015	
Date Purchased		Dealer's Name and Telephone Number		Engine:		Fuel Type:	
5/30/2015		Mankato Motors 507-625-5641		No: Cylinders		gas	
Original Owner		Dealer's City		State		Zip Code	
<input checked="" type="checkbox"/>		Mankato		MN		56001	
Transmission Type		<input checked="" type="checkbox"/> Antilock Brakes		Powertrain		Multiple Failure:	
6 sp auto		<input checked="" type="checkbox"/> Cruise Control				Incident Date(s)	
						30-MAY-2015	
<b>FAILED COMPONENT(S)/PART(S) INFORMATION</b>							
Vehicle Component Code: 100000 POWER TRAIN					Failure Mileage		Failure Speed
					6		0
<b>ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A TIRE FAILURE</b>							
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:		
<b>ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A CHILD SEAT FAILURE</b>							
Make:		Date Manufactured:		Model No./Name:			
Seat Type:		Installation System:					
Child Seat Component Code:		Failed Part:					
<b>APPLICABLE INCIDENT INFORMATION</b> <i>(Please describe in detail the incident(s), failure(s), crash(es), and injury(ies).)</i>							
Crash		Fire		Number of Persons Injured		Number of Deaths	
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		0		0	
						Reported to Police	
						N	
<b>Narrative Description of Incident(s), Crash(es), and Injury(ies).</b> 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).							
WHEN TRYING TO ACCELERATE FROM A COMPLETE STOP, THE VEHICLE SOMETIMES LAGS THEN ACCELERATES ABRUPTLY OR IT BUCKS TWICE BEFORE ACCELERATING SMOOTHLY. IT NEEDS A CALIBRATION UPDATE FOR THE POWERTRAIN.							
Include, if available: Police/Fire Department Report, Photos, and Repair Invoice. <b>ATTACH ADDITIONAL SHEETS IF NECESSARY.</b>							
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.							