

INFORMATION ACT (FOIA), 5 U.S.C. 552(B)(6)



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
AN 12 2016
14-OCT-2015

Repository ☐

Reference No.
10782080

OWNER INFORMATION (Type or Print)

Name **[REDACTED]**
Address **[REDACTED]**
City **GLENVIEW** State **IL** Zip Code **[REDACTED]**

Daytime Telephone Number **[REDACTED]**
Evening Telephone Number **[REDACTED]**
E-mail Address **[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 **[REDACTED]**
Make **VOLVO** Model **XC90** Model Year **2004**
Date Purchased **2013** Dealer's Name and Telephone Number **Oak Park** Engine: No: Cylinders **[REDACTED]** Fuel Type: **[REDACTED]**
Original Owner ☒ Dealer's City **Oak Park** State **IL** Zip Code **[REDACTED]**
Transmission Type ☒ Antilock Brakes ☒ Powertrain **[REDACTED]** Multiple Failure: **[REDACTED]** Incident Date(s) **14-JUL-2014**
☒ Cruise Control

FAILED COMPONENT(S)/PART(S) INFORMATION

Vehicle Component Codes: 110000 ELECTRICAL SYSTEM, ENGINE (PWS), 100000 POWER TRAIN
Failure Mileage **135000** Failure Speed **65**

ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A TIRE FAILURE

Tire Make **[REDACTED]** Tire Model (Name or Number) **[REDACTED]** Tire Size (Example P215/65R15) **[REDACTED]**
DOT No. (Example: DOTM19ABC036) **[REDACTED]** ☐ Original Equipment ☐ Prior Repair Failure Location: **[REDACTED]**
Tire Component Code **[REDACTED]** Tire Failure Type: **[REDACTED]**

ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A CHILD SEAT FAILURE

Make: **[REDACTED]** Date Manufactured: **[REDACTED]** Model No./Name: **[REDACTED]**
Seat Type: **[REDACTED]** Installation System: **[REDACTED]**
Child Seat Component Code: **[REDACTED]** Failed Part: **[REDACTED]**

APPLICABLE INCIDENT INFORMATION

Crash ☐ Yes ☒ No Fire ☐ Yes ☒ No Number of Persons Injured **[REDACTED]** Number of Deaths **[REDACTED]** 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 2004 VOLVO XC90. WHILE DRIVING 65 MPH, THE ENGINE RPMS DECREASED AS IF THE BRAKE PEDAL WERE DEPRESSED. THE VEHICLE WAS NOT TAKEN TO A DEALER OR REPAIRED AND THE FAILURE RECURRED. THE MANUFACTURER WAS NOT NOTIFIED OF THE FAILURE. THE VIN WAS NOT PROVIDED. THE FAILURE MILEAGE WAS 135,000.

was taken to dealer. Dealer said sensor replaced. This should be enough evidence. (DANGEROUS / WARNING CAN STOP ANY TIME IF ON HWY)

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.

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

ATTACH ADDITIONAL SHEETS IF NECESSARY

THERE SHOULD BE A RECALL
* ON XC90 2004 *

CAROL STREAM

IL 601

18 DEC '15

PM 9 L

NO POSTAGE
NECESSARY
IF MAILED
IN THE
UNITED STATES



BUSINESS REPLY MAIL

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, NHTSA-100
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

For a complete listing of NHTSA offices, visit www.nhtsa.gov

safercar.gov