

INFORMATION Redacted PURSUANT TO THE FREEDOM OF

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                     |                                                            |                                                                      |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------|------------------------------------------------------------|----------------------------------------------------------------------|
|  <b>INFORMATION ACT (FOIA), 5 U.S.C. 552(B)(6)</b><br><b>DOT Auto Safety Hotline</b>                                                                                                                                                                                                                                                                                                                                                                                                            |                                                                     | FOR AGENCY USE ONLY 100148                                 |                                                                      |
| <b>Vehicle Owner's Questionnaire</b><br><b>To Report Vehicle Safety Defects</b><br><b>1-888-DASH-2-DOT</b><br><b>(1-888-327-4236)</b><br><b>INTERNET: www.nhtsa.dot.gov/hotline</b>                                                                                                                                                                                                                                                                                                                                                                                              |                                                                     | Date Received<br><br>21-APR-2017<br><br><b>JUN 21 2017</b> | Repository <input type="checkbox"/><br><br>Reference No.<br>10979847 |
| <b>OWNER INFORMATION (Type or Print)</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                                                                     |                                                            |                                                                      |
| Name                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                                                     | Daytime Telephone Number                                   |                                                                      |
| Address                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                                                                     | Evening Telephone Number                                   |                                                                      |
| City                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | State                                                               | Zip Code                                                   |                                                                      |
| LOS ANGELES                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | CA                                                                  |                                                            |                                                                      |
| 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).                                                                                                                                                                                                                                                                |                                                                     |                                                            |                                                                      |
| <b>VEHICLE INFORMATION</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                                                                     |                                                            |                                                                      |
| 17 digit Vehicle Identification Number Located at bottom of windshield on driver's side                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                                                                     | Make                                                       | Model                                                                |
| WVWBN7AN6DE                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                                                     | VOLKSWAGEN                                                 | CC                                                                   |
| Date Purchased                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | Dealer's Name and Telephone Number                                  |                                                            | Model Year                                                           |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | Carmax San Antonio                                                  |                                                            | 2013                                                                 |
| Original Owner                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | Dealer's City                                                       | State                                                      | Zip Code                                                             |
| <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                                                                     | TX                                                         |                                                                      |
| Transmission Type                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | <input checked="" type="checkbox"/> Antilock Brakes                 | Powertrain                                                 | Engine:                                                              |
| Aut                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | <input checked="" type="checkbox"/> Cruise Control                  | FWD                                                        | No: Cylinders                                                        |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                     |                                                            | 4                                                                    |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                     | Multiple Failure:                                          | Fuel Type:                                                           |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                     |                                                            | Gas                                                                  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                     |                                                            | Incident Date(s)                                                     |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                     |                                                            | 08-MAR-2017                                                          |
| <b>FAILED COMPONENT(S)/PART(S) INFORMATION</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                     |                                                            |                                                                      |
| Vehicle Component Code: 140000 AIR BAGS                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                                                                     | Failure Mileage                                            | Failure Speed                                                        |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                     | 81,000                                                     |                                                                      |
| <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: DOTM9ABC036)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | <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><br>(Please describe in detail the incident(s), Failure(s), Crash(es), and injury(ies).)                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                     |                                                            |                                                                      |
| 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 |                                                            |                                                                      |
| Reported to Police                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                                                     |                                                            |                                                                      |
| N                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                     |                                                            |                                                                      |
| <b>Narrative Description of Incident(S), Crash(es), and Injury(ies).</b><br>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* TAKATA RECALL. THE CONTACT OWNS A 2013 VOLKSWAGEN CC. THE CONTACT RECEIVED NOTIFICATION OF NHTSA CAMPAIGN NUMBER: 16V078000 (AIR BAGS). THE VEHICLE WAS TAKEN TO THE DEALER AND THE CONTACT WAS INFORMED THAT HE WOULD BE NOTIFIED WHEN THE PART BECAME AVAILABLE. THE VEHICLE WAS NOT REPAIRED. THE CONTACT STATED THAT THE MANUFACTURER EXCEEDED A REASONABLE AMOUNT OF TIME FOR THE RECALL REPAIR. THE MANUFACTURER WAS MADE AWARE OF THE ISSUE. THE CONTACT HAD NOT EXPERIENCED A FAILURE. PARTS DISTRIBUTION DISCONNECT.                                                |                                                                     |                                                            |                                                                      |
| 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)**

The car has been fixed by dealer on 05/09/17. Dealer replaced part. Don't know if car is in good condition now.

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  
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, NEF-100  
1200 New Jersey Avenue SE.  
Washington, D.C. 20077-9382**



**safecar.gov**

**Think your vehicle  
has a safety defect?**



**If so:**

**Use the enclosed  
form to file a report.**

**or visit:**

**[www.safecar.gov](http://www.safecar.gov)**

**or call:**

**Vehicle Safety Hotline  
888-327-4236**



Vehicle Owner's Questionnaire (VOQ)  
U.S. Department of Transportation  
National Highway Traffic Safety Administration