

 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	Repository ☐
				13-JUN-2018 JUL 24 2018	Reference No. 11101645
OWNER INFORMATION (Type or Print)					
Name		Daytime Telephone Number		E-mail Address	
Address		Evening Telephone Number			
City	State	Zip Code			
SMYRNA BEACH	FL				
<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		Make	Model	Model Year	
WAUGFAFCXFN		AUDI	A6	2015	
Date Purchased	Dealer's Name and Telephone Number		Engine:	Fuel Type:	
12-2014	Audi 407-992-4321		No: Cylinders	H16N	
Original Owner ☐	Dealer's City	State	Zip Code	4	TEST
Transmission Type	☒ Antilock Brakes	Powertrain	Multiple Failure:		Incident Date(s)
AUTO	☒ Cruise Control				28-MAY-2018
FAILED COMPONENT(S)/PART(S) INFORMATION					
Vehicle Component Codes: 060000 ENGINE (PWS), 061000 ENGINE AND ENGINE COOLING: ENGINE				Failure Mileage	Failure Speed
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	Failure Location:			
	☐ 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 ☐ Yes ☒ No	Fire ☐ Yes ☒ No	Number of Persons Injured	Number of Deaths	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 2015 AUDI A6. THE CONTACT RECEIVED NOTIFICATION OF NHTSA CAMPAIGN NUMBER: 18V229000 (ENGINE AND ENGINE COOLING); HOWEVER, THE PARTS TO DO THE REPAIR WERE UNAVAILABLE. THE CONTACT STATED THAT THE MANUFACTURER EXCEEDED A REASONABLE AMOUNT OF TIME FOR THE RECALL REPAIR. THE CONTACT CALLED A LOCAL DEALER (AUDI NORTH ORLANDO, 139 N. OREGON ST., SANFORD, FL 32771) AND WAS REFERRED TO NHTSA. THE MANUFACTURER WAS NOT NOTIFIED. THE CONTACT HAD NOT EXPERIENCED A FAILURE. VIN TOOL CONFIRMS PARTS NOT AVAILABLE.					
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.					