

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

Date Received 04-JAN-2022	Repository <input type="checkbox"/>
Reference No. 11446169	

Internet Safety Administration INTERNET:www.nhtsa.dot.gov/hotline

OWNER INFORMATION (Type or Print)			
Name	[REDACTED]		
Address	[REDACTED]		
City	State	ZIP Code	
Mahwah	NJ	[REDACTED]	
Daytime Telephone Number		E-mail Address	
[REDACTED]		[REDACTED]	
Evening Telephone Number			

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 yw4162um9n2 [REDACTED]		MAKE VOLVO	Model Year 2022
Date Purchased	Dealer's Name and Telephone Number Volvo Cars Ramsey 2013275105	Engine: No. Cylinders	Fuel Type:
Original Owner <input type="checkbox"/>	Dealer's City Ramsey	STATE NJ	ZIP Code 07446
Transmission Type	<input type="checkbox"/> Antilock Brakes <input type="checkbox"/> Cruise Control	Powertrain	Multiple Failure: Incident Date(s) 30-OCT-2021

FAILED COMPONENT(S)/PART(S) INFORMATION		
Vehicle Components Codes: 284000 BACK OVER PREVENTION: CAMERA SYSTEM		Failure Mileage 1500.0
		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: DOTMAL 9ABC036)	<input type="checkbox"/> Original Requirement <input type="checkbox"/> Prior Repair	Failure Location:
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), 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	Number of Deaths
		Reported to Police N	

Narrative Description of Incident(s), Crash(es), 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).

The contact leased a 2022 Volvo XC40. The contact stated that while using the backup camera at night, the brightness of the taillights would obstruct his vision while reversing. The manufacturer was notified of the failure and provided him with a case number. The contact also notified the dealer of the failure and an inspection was performed. The inspection determined no fault with the camera system. The manufacturer then sent him an email that also informed him that there were no defects with the camera. The vehicle was not repaired. The failure mileage was 1,500.