

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

National Highway Traffic Safety Administration 1-888-DASH-2-DUI (1-888-327-4236) INTERNET: www.nhtsa.dot.gov/hotline		FOR AGENCY USE ONLY 100148	
		Date Received 23-FEB-2022	Repository <input type="checkbox"/> Reference No. 11453634
OWNER INFORMATION (Type or Print)			
Name [REDACTED]		Daytime Telephone Number [REDACTED]	
Address [REDACTED]		E-mail Address [REDACTED]	
City Water Mill	State NY	ZIP Code [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 waus2a26m [REDACTED]		MAKE AUDI	Model Year 2021
Date Purchased 12/14/2020	Dealer's Name and Telephone Number AUDI SOUTHAMPTON 631.283.0888		Engine: No. Cylinders 6
Original Owner <input checked="" type="checkbox"/>	Dealer's City Southampton	STATE NY	ZIP Code 11968
Transmission Type AUTOMATIC	<input checked="" type="checkbox"/> Antilock Brakes <input checked="" type="checkbox"/> Cruise Control	Powertrain	Multiple Failure: Incident Date(s) 01-DEC-2021
			1/15/2021
FAILED COMPONENT(S)/PART(S) INFORMATION			
Vehicle Components Codes: 185000 VEHICLE SPEED CONTROL; CRUISE CONTROL		Failure Mileage 1000.0	Failure Speed 70
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: DOTM4L 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 owns a 2021 Audi A7. The contact stated while driving 70 MPH with the cruise control activated, the vehicle unexpectedly decelerated. The vehicle was taken to the dealer. The dealer informed the contact that the speed control software needed to be reprogrammed. The software was updated. The manufacturer was made aware of the failure but provided no assistance. The failure mileage was approximately 1,000.			
This problem continues to occur.			
[REDACTED]		1/9/22	
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 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.			