

9942



U.S. Department of Transportation
National Highway Traffic Safety Administration

**AUTO SAFETY HOTLINE
VEHICLE OWNER'S QUESTIONNAIRE**

NATIONWIDE 1-800-424-6383
DC METRO AREA 202-366-5123

FOR AGENCY USE ONLY

DATE RECEIVED

od-ar _____
ri-dt _____
od-rt _____
up-hr _____

REFERENCE NO

560151

OWNER INFORMATION (TYPE OR PRINT)

NAME [REDACTED]
ADDRESS [REDACTED]
CITY [REDACTED] STATE [REDACTED] ZIP [REDACTED]

Do you authorize NHTSA to provide a copy of this report to the manufacturer of your vehicle? YES NO
In the absence of an authorization, NHTSA WILL NOT provide your name or address to the vehicle manufacturer.

SIGNATURE OF OWNER

DATE **3-13-00**

VEHICLE INFORMATION

VEHICLE IDENTIFICATION NO.* 4V670ECLTXN766281		VEHICLE MAKE Volvo	VEHICLE MODEL VNL64T	MODEL YEAR 1998
*LOCATED AT BOTTOM OF WINDSHIELD ON DRIVER'S SIDE				
CURRENT ODOMETER READING 2111405	DATE PURCHASED 5/14/98	DEALER'S NAME, CITY & STATE Denver Volvo, CO		ENGINE SIZE (CID/CC/LI) 6
<input checked="" type="checkbox"/> NEW <input type="checkbox"/> USED		NO. CYLINDERS 6		<input type="checkbox"/> TURBO <input checked="" type="checkbox"/> DIESEL <input type="checkbox"/> GAS <input type="checkbox"/> FUEL INJECTOR
TRANSMISSION TYPE <input checked="" type="checkbox"/> MANUAL <input type="checkbox"/> AUTOMATIC	ANTILOCK BRAKES <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	RESTRAINT SYSTEM <input type="checkbox"/> DRIVERSIDE AIRBAG <input type="checkbox"/> MOTORBELT <input type="checkbox"/> PASSENGERSIDE AIRBAG <input checked="" type="checkbox"/> 3-POINT BELT <input type="checkbox"/> 2-POINT BELT		CRUISE CONTROL <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO
		DRIVETRAIN <input type="checkbox"/> FRONT <input type="checkbox"/> REAR <input type="checkbox"/> 4-WHEEL	BODY STYLE STAWAG _____ HATCH BK _____ 4 DR _____ VAN _____ 2 DR _____ PK UP TRK _____ OTHER <input checked="" type="checkbox"/>	

FAILED COMPONENT(S)/PART(S) INFORMATION (REPORT TIRE INFORMATION ON BACK)

COMPONENT Seats, wheel bearings Cones/Races	PART NAME(S)	LOCATION <input type="checkbox"/> LEFT FRONT <input type="checkbox"/> RIGHT REAR	FAILED PART(S) <input type="checkbox"/> ORIGINAL <input type="checkbox"/> REPLACEMENT
NO. OF FAILURES	DATE(S) OF FAILURE(S)	MANUFACTURER CONTACTED <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	NHTSA PREVIOUSLY CONTACTED <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO
	MILEAGE AT FAILURE(S)		
	VEHICLE SPEED AT FAILURE(S)		

APPLICABLE ACCIDENT INFORMATION

ACCIDENT <input type="checkbox"/> YES <input type="checkbox"/> NO	FIRE <input type="checkbox"/> YES <input type="checkbox"/> NO	NUMBER PERSONS INJURED	NUMBER OF FATALITIES	PROPERTY DAMAGE ESTS	POLICE REPORTED <input type="checkbox"/> YES <input type="checkbox"/> NO
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NARRATIVE DESCRIPTION OF FAILURE(S), ACCIDENT(S), INJURY(IES)

PREMATURE WEAR FROM STEER TIRES RESULTING FROM IMPROPER COMBINATION OF RACE/BEARINGS IN MERITOR AXLES.

CONTINUE ON BACK IF NEEDED

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 responses 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.

9942	18 11/27/99	Parts	204748		
		3720 BEARING - 3720 TIMKEN		95209	1.00
		HM212049 BEARING - CONE		95209	1.00
		HM212011 BEARING - RACE		95209	1.00
		8069185 GASKET - HUBCAP VN		95209	1.00
		65156J SEAL - DRIVE AXLE		95209	1.00
		65263J SEAL - STEER		95209	1.00
		Labor			
		REPLACE LEFT REAR WHEEL SEAL		95209	1.00
		REPLACE LEFT STEER WHEEL SEAL, BEARINGS, & RACES		95209	1.50
	07/08/99	Labor	161594		
		JACK UP FRT END CHECK BRGS & FLUID LEVEL		88772	0.50