



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

Date Received

Od_or _____
 rt_dt _____
 od_rt _____
 up_ltr _____

Reference No.

OWNER INFORMATION (Type or Print)

[Redacted Owner Information]

POSTED
 RECEIVED
 APR 11 PM 2:5
 DEFECTS INVESTIGATION OFFICE

564870

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 ____/____/____

PRODUCT INFORMATION

Vehicle Identification No. (VIN) <small>(Located at bottom of windshield on driver's side)</small>		Make	Model	Year
4V67DAJY3XN76563D		VOLVO	VN64T 610	1999
Purchased Date 07/99	Dealer's Name		Engine Size (CID/CCA)	<input type="checkbox"/> Turbo <input checked="" type="checkbox"/> Diesel <input type="checkbox"/> Gas <input type="checkbox"/> Fuel Injection
<input type="checkbox"/> New <input type="checkbox"/> Used	Dealer's City	State	Zip Code	No. Cylinders
Manufacture Date (on driver's door or pillar)	Transmission Type <input type="checkbox"/> Manual <input type="checkbox"/> Automatic	Restraint System <input type="checkbox"/> Driverside Air Bag <input type="checkbox"/> Motorball <input type="checkbox"/> Passenger/Air Bag <input type="checkbox"/> 2-Point Belt <input type="checkbox"/> 3 Point Belt	Cruise Control <input type="checkbox"/> Yes <input type="checkbox"/> No	Drivetrain <input type="checkbox"/> Front <input type="checkbox"/> Rear <input type="checkbox"/> 4-Wheel
			Vehicle Type <input type="checkbox"/> Car <input type="checkbox"/> Sport Utility <input type="checkbox"/> Van <input checked="" type="checkbox"/> Truck <input type="checkbox"/> Minivan <input type="checkbox"/> Motorcycle <input type="checkbox"/> Other	Body Style <input type="checkbox"/> 2-Door <input type="checkbox"/> 4-Door <input type="checkbox"/> Stationwagon <input type="checkbox"/> Pick Up Truck <input type="checkbox"/> Other

FAILED COMPONENT(S)/PART(S) INFORMATION

Part Name(s)	Location <input type="checkbox"/> Left <input type="checkbox"/> Right <input type="checkbox"/> Front <input type="checkbox"/> Rear	Failed Part(s) <input type="checkbox"/> Original <input type="checkbox"/> Replacement	Handicap Adaptive Equip <input type="checkbox"/> Yes <input type="checkbox"/> No
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TO BE COMPLETED WHEN REPORTING A TIRE FAILURE

Tire Brand	Tire Name				
Complete Tire Size	DOT No.				
No. of Failures	Date(s) of Failure(s)	Mileage at Failure(s)	Vehicle Speed at Failure(s)	Failed Part(s) Available? <input type="checkbox"/> Yes <input type="checkbox"/> No	NHTSA Previously Contacted? <input type="checkbox"/> Yes <input type="checkbox"/> No

APPLICABLE INCIDENT INFORMATION

(Please describe in detail the incident(s), failure(s), crash(es), and injury(ies). Attach photos if available.)

Crash <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Fire <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Number of Persons Injured --	Number of Fatalities --	Reported to Manufacturer <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
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Narrative Description of Incident(s), Failure(s), Crash(es), and Injury(ies).
 VEHICLE OUT OF ALIGNMENT, ALL TIRES WORN AT 60,000 MILES. LOWER 12-VOLT ACCESSORY
 PLUG ON DRIVER'S SIDE IN SLEEPER WOULD CONTINUALLY CAUSE FUSES IN APPLIANCES
 TO FAIL. FUSE FOR OUTLET NEVER BLEW. DEALER SERVICED 4 TIMES, FOUND FRAYED
 WIRE IN OCT '99. MARCH 23 2000 WHILE DRIVING VEHICLE SLEEPER BIRTH CONTROL PANEL
 IN AREA OF FAULTY BUTLET CAWANT FIRE. VEHICLE CONSUMED BY FIRE. OTHER PROBLEMS
 INCLUDED BRAKES AND OUT-OF-ROUND BRAKE DRUMS. ALSO PROBLEMS WITH DASH
 INSTRUMENTS NOT WORKING. WILL SEND APPRS + RECORDS.

Continue on back.

The Privacy Act of 1974 - Public Law 93-579 This information is requested pursuant to 49 U.S.C. Chapter 301. You are under no obligation to respond to this questionnaire. Your response may be used to assist NHTSA in determining whether a manufacturer should take appropriate action to correct a safety defect. If NHTSA proceeds with administration enforcement or litigation against a manufacturer, your response, or a statistical summary thereof, may be used in support of the agency's action.

Mail postage free or fax to 202-366-7882