

U.S. Department
of TransportationNational Highway
Traffic Safety
Administration

DOT Auto Safety Hotline

Vehicle Owner's Questionnaire (VOQ)

NATIONWIDE 1-888-DASH-2-DOT
1-888-327-4236
www.nhtsa.dot.gov/hotline

FOR AGENCY USE ONLY 258

Date Received

23-JUN-2000

Od_or _____
rt_dt _____
od_rt _____
up_ltr _____

Reference No.

724726

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

Signature of Owner _____ Date ____/____/____

VEHICLE INFORMATION

Vehicle Ident. No. (VIN.) <small>(located at front of vehicle or on driver's side)</small>	Vehicle Make	Vehicle Model	Vehicle Year	Current Odometer Reading
WAUZL64B7YN045980	AUDI	A6	2000	

Purchase Date 01-DEC-1999	Dealer's Name _____	Engine Size (CID/CCL) 4.2L	<input type="checkbox"/> Turbo <input type="checkbox"/> Diesel <input type="checkbox"/> Gas
<input checked="" type="checkbox"/> New <input type="checkbox"/> Used	City _____ State _____ Zip Code _____	No. Cylinders _____	<input type="checkbox"/> Fuel Injection

Transmission Type <input type="checkbox"/> Manual <input type="checkbox"/> Automatic	Antilock Brakes <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Restraint System <input checked="" type="checkbox"/> 3-Point Belt <input type="checkbox"/> Driver Side Airbag <input type="checkbox"/> Passenger Side Airbag <input type="checkbox"/> Inertial Belt <input type="checkbox"/> 2-Point Belt	Cruise Control <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Drive Train <input type="checkbox"/> Front <input type="checkbox"/> Rear <input checked="" type="checkbox"/> 4-Wheel	Vehicle Type <input type="checkbox"/> Car <input type="checkbox"/> Van <input type="checkbox"/> Minivan <input type="checkbox"/> Other <input type="checkbox"/> Sport Util Truck <input type="checkbox"/> Motorcycle	Body Style <input type="checkbox"/> 2-Door <input checked="" type="checkbox"/> 4-Door <input type="checkbox"/> Station Wagon <input type="checkbox"/> Pick Up Truck <input type="checkbox"/> Other
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FAILED COMPONENT(S)/PART(S) INFORMATION

Component Q2750010	Part Name(s) TIRES:SIDEWALL	Location <input type="checkbox"/> Left <input type="checkbox"/> Front <input type="checkbox"/> Right <input type="checkbox"/> Rear	Failed Part(s) <input type="checkbox"/> Original <input type="checkbox"/> Replacement
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No. of Failures 4	Date(s) of Failure(s) <u>01-DEC-1999</u> Mileage at Failure(s) <u>800</u> Vehicle Speed at Failure(s) <u>?</u>	Failed Part(s) Available? Yes No	NHTSA Previously Contacted? Yes No
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APPLICATION INCIDENT INFORMATION

(Please describe in detail the incident(s), failure(s), crash(es), and injury(ies) on the back of this form.)

Crash <input type="checkbox"/> Yes <input type="checkbox"/> No	Fire <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Number of Persons Injured 0	Number of Fatalities 0	Estimated Property Damage	Reported to Police <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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NARRATIVE DESCRIPTION OF FAILURE(S), INCIDENT(S), INJURY(IES)

I HAVE HAD THIS CAR FOR ONLY SLIGHTLY MORE THAN 6 MONTHS, AND HAVE HAD NO COLLISIONS OR OTHER UNUSUAL IMPACTS TO TIRES. AFTER ONLY 800 MILES OF SERVICE, MY RIGHT FRONT TIRE DEVELOPED A BULGING KNOT IN THE SIDEWALL. DEALER INSPECTED THE TIRE AND COULD FIND NO INDICATION OF "IMPACT" INJURY SO TIRE WAS REPLACED UNDER WARRANTY, AS VEHICLE WAS ONLY 2 WEEKS OLD. NOW I HAVE DISCOVERED 3 MORE OF THE TIRES (LF, RF & RR) HAVE DEVELOPED SIMILAR BULGING KNOTS IN THE SIDEWALL, ONE OF WHICH IS THE TIRE THAT WAS REPLACED BY THE DEALER AT 800 MILES. I DRIVE ONLY ON PAVED CITY STREETS, AND HAVE NEVER EXPERIENCED TIRE FAILURES OF THIS TYPE ON ANY OTHER VEHICLE THAT I HAVE OWNED, SO I DO NOT BELIEVE THAT THIS CONDITION IS DUE TO DRIVING CONDITIONS.*AK

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 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.

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WAUZL64B7YN045980	DUNLOP	SP SPORT	1900	

Purchase Date 01-DEC-1999	Dealer's Name _____	Engine Size (CID/CCL) 4.2L	<input type="checkbox"/> Turbo <input type="checkbox"/> Diesel <input type="checkbox"/> Gas
<input checked="" type="checkbox"/> New <input type="checkbox"/> Used	City _____ State _____ Zip Code _____	No. Cylinders _____	<input type="checkbox"/> Fuel Injection

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