



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

Auto Safety Hotline

Vehicle Owner's Questionnaire

NATIONWIDE 1-800-424-9393
DC METRO AREA (202) 366-0123
INTERNET: <http://www.nhtsa.dot.gov>

FOR AGENCY USE ONLY 241

Date Received

28-JAN-2002

Od_or _____
rt_dt _____
pd_rt _____
rp_lr _____

Reference No.

8002943

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) (Locate at bottom of windshield or driver's side)	Vehicle Make	Vehicle Model	Vehicle Year	Current Odometer Reading
YV1TS94D911216072	VOLVO	S80	2001	

Purchase Date	Dealer's Name _____	Engine Size (CID/CC/L) _____	☐ Turbo ☐ Diesel ☐ Gas ☐ Fuel Injection
☒ New ☐ Used	City _____ State _____ Zip Code _____	No Cylinders _____	

Transmission Type	Antilock Brakes	Restraint System	Cruise Control	Drive Train	Vehicle Type	Body Style
☐ Manual ☐ Automatic	☒ Yes ☐ No	☒ 3-Point Belt ☐ Motorbelt ☐ Driverside Airbag ☐ 2-Point Bel ☐ Passengerside Airbag	☐ Yes ☐ No	☐ Front ☐ Rear ☐ 4-Wheel	☐ Car ☐ Sport Util ☐ Van ☐ Truck ☐ Minivan ☐ Motorcycle ☐ Other _____	☐ 2-Door ☐ 4-Door ☐ Stationwagon ☐ Pick Up Truck ☐ Other _____

FAILED COMPONENT(S)/PART(S) INFORMATION

Component 08113000	Part Name(s) FUEL:FUEL TANK ASSEMBLY:TANK	Location ☐ Left ☐ Right ☐ Front ☐ Rear	Failed Part's ☐ Original ☐ Replacement
No of Failure	Dates of Failure(s) 14-NOV-2001 Mileage at Failure(s) 194 Vehicle Speed at Failure(s) _____	Failed Part(s) ☐ Yes ☐ No	NHTSA Previously ☐ Yes ☐ No

APPLICATION INCIDENT INFORMATION

(Please describe in detail the incident(s), Failure(s), Crash(es), and Injury(ies) on the back of this form)

Crash ☐ Yes ☐ No	Fire ☐ Yes ☐ No	Number of Persons Injured	Number of Fatalities	Estimated Property Damag	Reported to Police ☐ Yes ☐ No
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NARRATIVE DESCRIPTION OF FAILURE(S), INCIDENT(S), INJURY(IES)

DEALER HAS REPLACE FUEL TANK DUE TO LEAKAGES UNDER TANK. FEEL FREE TO PROVIDE ANY FURTHER INFORMATION.*AK

COPIES OF REPORTS - FREE -

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.

 U.S. Department of Transportation National 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 241	
		Date Received <u>13 JAN 2002</u> Office <u>DEFECTS INVESTIGATION</u>		Od_or _____ rt_dt _____ od_rt _____ up_ltr _____	
OWNER INFO: NAME (Type or Print) _____				Reference No. 8002943	
[Redacted] 35998				Work Number _____ Home Number _____	
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 <u>2/11/02</u>	
VEHICLE INFORMATION					
Vehicle Ident. No. (VIN) (Located at bottom windshield on driver's side) YV1TS94D911216072		Vehicle Make VOLVO		Vehicle Year 2001	
		Vehicle Model S80		Current Odometer Reading 5515	
Purchase Date _____ ☒ New ☐ Used		Dealer's Name <u>Volvo of Richardson</u> City <u>Richardson</u> State <u>TX</u> Zip Code <u>75080</u>		Engine Size <u>CID/CC/L</u> No. Cylinders <u>6</u>	
Transmission Type ☐ Manual ☒ Automatic		Antilock Brakes ☒ Yes ☐ No		Restraint System ☒ 3-Point Belt ☐ Motorbelt ☒ Driverside Airbag ☐ 2-Point Belt ☒ Passengerside Airbag	
		Cruise Control ☒ Yes ☐ No		Drive Train ☒ Front ☐ Rear ☐ 4-Wheel	
		Vehicle Type ☒ Car ☐ Sport Utility Truck ☐ Van ☐ Minivan ☐ Motorcycle ☐ Other _____		Body Style ☐ 2-Door ☒ 4-Door ☐ Stationwagon ☐ Pick Up Truck	
FAILED COMPONENT(S)/PART(S) INFORMATION					
Component 06113000		Part Name(s) FUEL:FUEL TANK ASSEMBLY:TANK		Location ☒ Left ☐ Right ☐ Front ☒ Rear	
				Failed Part/s ☒ Original ☐ Replacement	
No. of Failures 1		Date(s) of Failure(s) <u>14-NOV-2001</u> Mileage at Failure(s) <u>194</u> Vehicle Speed at Failure(s) <u>Failed @ service station</u>		Failed Part(s) ☐ Yes ☐ No	
				NHTSA Previously ☐ Yes ☐ No	
APPLICATION INCIDENT INFORMATION (Please describe in detail the incident(s), failure(s), crash(es), and injury(ies) on the back of this form)					
Crash ☐ Yes ☒ No		Fire ☐ Yes ☒ No		Number of Persons Injured _____	
				Number of Fatalities _____	
				Estimated Property Damage _____	
				Reported to Police ☐ Yes ☒ No	
NARRATIVE DESCRIPTION OF FAILURE(S), INCIDENT(S), INJURY(IES)					
DEALER HAS REPLACE FUEL TANK DUE TO LEAKAGES UNDER TANK. FEEL FREE TO PROVIDE ANY FURTHER INFORMATION.*AK					
CONTINUE ON BACK IF NEEDED					
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