



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 1039

Date Received

24-APR-2002

Od_or _____
rt_dt _____
pd_rt _____
rp_lr _____

Reference No.

8008454

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) (Location at bottom of windshield and driver's side door)		Vehicle Make	Vehicle Model	Vehicle Year	Current Odometer Reading
3VWBF61C9WM019751		VOLKSWAGEN	BEETLE	1998	
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
☐ Manual ☐ Automatic	☐ Yes ☐ No	☐ 3-Point Belt ☐ Driverside Airbag ☐ Passengerside Airbag ☐ Motorbelt ☐ 2-Point Bel	☐ Yes ☐ No	☐ Front ☐ Rear ☐ 4-Wheel	☐ Car ☐ Van ☐ Minivan ☐ Other _____
				☐ Sport Utl ☐ Truck ☐ Motorcycle	Body Style
					☐ 2-Door ☐ 4-Door ☐ Stationwagon ☐ Pick Up Truck ☐ Other _____

FAILED COMPONENT(S)/PART(S) INFORMATION

Component 10121000	Part Name(s) VISUAL SYSTEMS:GLASS:POWER WINDOW DOOR AND SIDE	Location ☐ Left ☐ Right ☐ Front ☐ Rear	Failed Part(s) ☐ Original ☐ Replacement
No of Failure	Dates of Failure(s) _____ Mileage at Failure(s) _____ 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)

POWER WINDOW SWITCH ON PASSENGER'S SIDE IS BROKEN. CAN'T GET WINDOW DOWN. DEALER CONTACTED. *AK

COPIES OF REPORTS ARE KEPT

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.

 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 1039	
		Rec'd NVS-210 24-APR-2002 NOV 12 A 5:35 Od_or _____ rt_dt _____ od_rt _____ up_ltr _____	
OWNER INFORMATION (Type or Print)		Reference No. 8008454	
[Redacted] 749968 [Redacted]		[Redacted] [Redacted] [Redacted]	
ELIZABETHTOWN NJ		Work Number [Redacted] Home Number [Redacted]	
Do you authorize NHTSA to provide a copy of report to the manufacturer of your vehicle? ☐ YES ☐ NO In the absence of an answer, this report will be sent to the vehicle manufacturer. Signature of Owner: [Redacted] Date: 10/25/02			
VEHICLE INFORMATION			
Vehicle Ident. No. (VIN) (Located at bottom of windshield on driver's side) 3VWBF61C9WM019751	Vehicle Make VOLKSWAGEN	Vehicle Model BEETLE	Vehicle Year 1998 Current Odometer Reading 99K
Purchase Date 11/01/02 ☐ New ☒ Used	Dealer's Name _____ City _____ State _____ Zip Code _____		Engine Size (CID/CC/L) _____ No Cylinders _____ ☒ Turbo ☐ Diesel ☐ Gas ☐ Fuel Injection
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 ☐ Van ☐ Minivan ☐ Other _____		Body Style ☒ 2-Door ☐ 4-Door ☐ Stationwagon ☐ Pick Up ☐ Truck	
FAILED COMPONENT(S)/PART(S) INFORMATION			
Component 10121000	Part Name(s) VISUAL SYSTEMS: GLASS: POWER WINDOW DOOR AND SIDE	Location ☐ Left ☐ Front ☐ Right ☐ Rear	Failed Part(s) ☐ Original ☐ Replacement
No of Failures 1	Date(s) of Failure(s) Feb 02 Mileage at Failure(s) 50000 Vehicle Speed at Failure(s) 0	Failed Part(s) ☒ Yes ☐ No	NHTSA Previous y ☐ 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)			
POWER WINDOW SWITCH ON PASSENGER'S SIDE IS BROKEN. CAN'T GET WINDOW DOWN. DEALER CONTACTED. *AK <i>All buttons on both sides are loose & fall off & pop back on</i>			

CONTINUE ON BACK IF NEEDED

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