



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 798

Date Received

16-MAY-2002

Od_or _____
rt_dt _____
pd_rt _____
rp_lr _____

Reference No.

8009979

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>(Location at bottom of and/or above windshield)</small>	Vehicle Make VOLKSWAGEN	Vehicle Model BEETLE	Vehicle Year 2002	Current Odometer Reading		
Purchase Date <input checked="" type="checkbox"/> New <input type="checkbox"/> Used	Dealer's Name _____ City _____ State _____ Zip Code _____	Engine Size (CID/CC/L) _____ No Cylinders _____	<input type="checkbox"/> Turbo <input type="checkbox"/> Diesel <input type="checkbox"/> Gas <input type="checkbox"/> Fuel Injectio			
Transmission Type <input type="checkbox"/> Manual <input type="checkbox"/> Automatic	Antilock Brakes <input type="checkbox"/> Yes <input type="checkbox"/> No	Restraint System <input checked="" type="checkbox"/> 3-Point Belt <input type="checkbox"/> Motorbelt <input type="checkbox"/> Driverside Airbag <input type="checkbox"/> 2-Point Bel <input type="checkbox"/> Passengerside Airbag	Cruise Control <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Drive Train <input type="checkbox"/> Front <input type="checkbox"/> Rear <input type="checkbox"/> 4-Wheel	Vehicle Type <input type="checkbox"/> Car <input type="checkbox"/> Sport Util <input type="checkbox"/> Van <input 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

Component 06410000	Part Name(s) FUEL: THROTTLE LINKAGES AND CONTROL: PEDAL	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
No of Failure 1	Dates of Failure(s) _____ 30-SEP-2001 Mileage at Failure(s) _____ 5000 Vehicle Speed at Failure(s) _____	Failed Part(s) <input type="checkbox"/> Yes <input type="checkbox"/> No	NHTSA Previously <input type="checkbox"/> Yes <input type="checkbox"/> 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 <input type="checkbox"/> Yes <input type="checkbox"/> No	Fire <input type="checkbox"/> Yes <input type="checkbox"/> No	Number of Persons Injured	Number of Fatalities	Estimated Property Damag	Reported to Police <input type="checkbox"/> Yes <input type="checkbox"/> No
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NARRATIVE DESCRIPTION OF FAILURE(S), INCIDENT(S), INJURY(IES)

CONSUMER STATES THAT THE VEHICLE WILL INTERMITTENTLY LOCK UP AT A CERTAIN SPEED AND STAY THERE FOR ABOUT 30 SECONDS THE CONSUMER HAS TRIED TO STEP ON THE BRAKE AND THE GAS PEDALS BUT THE VEHICLE WILL STILL DRIVE AT THE SAME SPEED. CONTACTED DEALER AND THE DEALER IS NOT WILLING TO DO ANYTHING.*JB

COPIED FROM NHTSA FORM 101

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

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

Vehicle Owner's Questionnaire (VOQ)

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

FOR AGENCY USE ONLY 798

Date Received: 02 MAY 16 2002
 Date: 16-MAY-2002
 DEFECTS OFFICE INVOLVED

Od_r _____
 r_dt _____
 od_rt _____
 up_lr _____

Reference No.
8009979

OWNER INFORMATION (Type or Print)

RICHARD ALLEN 754515
 6907 MEXICALA COURT
 TAMPA FL 33634

Work Number _____
 Home Number 813-249-1083

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: Richard Allen Date: 6/7/02

VEHICLE INFORMATION

Vehicle Ident. No. (VIN.) (located at bottom of windshield on driver's side): 3VWCP21C42M40092P
 Vehicle Mak: VOLKSWAGEN
 Vehicle Mode: TDI BEETLE
 Vehicle Year: 2002
 Current Odometer Reading: 7000

Purchase Date: 10/01
 Dealer's Name: LINDELL MOTORS, INC
 Engine Size (CID/KCC/L): 1.9L
 No. Cylinders: 4
 Turbo Diesel Gas Fuel Injectio

New Used
 City: Tampa State: FL Zip Code: 33609

Transmission Type: Manual Automatic
 Anti-lock Brakes: Yes No
 Restraint System: 3-Point Belt Motorbelt
 Driver's Side Airbag 2-Point Belt
 Passenger Side Airbag
 Cruise Control: Yes No
 Drive Train: Front Rear 4-Wheel
 Vehicle Type: Car Sport Utl Truck Motorcycle
 Van Minivan Other
 Body Style: 2-Door 4-Door Stationwagon Pick Up Truck

FAILED COMPONENT(S)/PART(S) INFORMATION

Component: 08410000
 Part Name(s): FUEL:THROTTLE LINKAGES AND CONTROL:PEDAL ?
 Location: Left Right Front Rear
 Failed Part(s): Original Replacement

No. of Failures: 30 TO 30
 Date(s) of Failure(s): 30-SEP-2001 MULTIPLE-OFTEN
 Mileage at Failure(s): 5000
 Vehicle Speed at Failure(s): LESS THAN 20MPH
 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 Incident(s), Failure(s), Crash(es), and Injury(ies)

THE PROBLEM IS A SLOW SPEED LESS THAN 20 MILES PER HOUR WHEN YOU ACCELERATE FROM A STOP OR SLOW SPEED YOU APPLY POWER AND NOTHING HAPPENS. IT IS AS IF YOU ARE OUT OF FUEL. EVERYTHING WILL BE FINE YOU GO TO PULL OUT IN TRAFFIC OR PASS AND YOU PRESS ACCELERATOR THE POWER LOSS OCCURS AND RPM'S DROP TO 700 AND YOU CAN'T GO. THE IS HAPPENING MORE EACH WEEK AND IS EXTREMELY DANGEROUS AS YOU DO NOT KNOW WHEN IT MAY HAPPEN. IT IS TOTALLY UNPREDICTABLE IT IS AS IF THE CAR STALLS BUT IT IS SMOOTH, NO JERKING, JUST A LOSS OF POWER DOWN TO IDLE SPEED.

US Department of Transportation

National Highway Traffic Safety Administration

400 Seventh St., S.W. Washington, D.C. 20590

Official Business Penalty for Private Use \$300



ATTACH ADDITIONAL SHEETS IF NECESSARY

NO POSTAGE NECESSARY IF MAILED IN THE UNITED STATES

BUSINESS REPLY MAIL

FIRST CLASS PERMIT NO 73173 WASHINGTON, D.C.

POSTAGE WILL BE PAID BY NATL. HWY. TRAFFIC SAFETY ADMIN.

U.S. Department of Transportation National Highway Traffic Safety Administration DOT Auto Safety Hotline, NSA-10.1 400 7th Street, SW Washington, DC 20590

20590+0001



VEHICLE OWNER'S QUESTIONNAIRE

DOT AUTO SAFETY HOTLINE

TO REPORT VEHICLE SAFETY DEFECTS COMPLETE THIS FORM OR

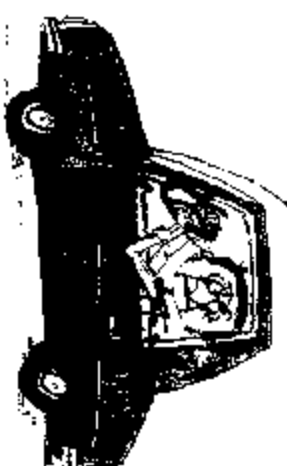
DASH2DOT

and dial toll free at

1-888-DASH-2-DOT

1-888-327-4236

DOT Auto Safety Hotline (DASH) 2 DOT



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