


|  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 1375 Date Received 13-NOV-2002 | |
|---|---|---|--|
| U.S. Department of Transportation National Highway Traffic Safety Administration | | Od_or r_dt od_rt up_itr | Reference No. 8022678 |
| OWNER INFORMATION (Type or Print) [Redacted] | | | |
| EAU CLAIRE WI | | Work Number SAME | Home Number |
| Do you authorize NHTSA to provide a copy of report to the manufacturer of your vehicle? In the absence of an authorization, NHTSA WILL NOT provide your name and address to the vehicle manufacturer. | | <input checked="" type="checkbox"/> YES | <input type="checkbox"/> NO |
| Signature of Owner [Redacted] | | Date 11/29/02 | |
| VEHICLE INFORMATION | | | |
| Vehicle Ident. No. (VIN.) (Located at bottom of windshield on driver's side) 3VWCB21CX1M471550 | Vehicle Make VOLKSWAGEN | Vehicle Model BEETLE | Vehicle Year 2001 |
| Current Odometer Reading 4,436 | Purchase Date 6-25-01 | Dealer's Name CAR CITY INC. | Engine Size (CID/CC/L) 2.0L/125 |
| <input checked="" type="checkbox"/> New <input checked="" type="checkbox"/> Used BOUGH NEW | City EAU CLAIRE State WI Zip Code 54701 | No Cylinders 4 | <input type="checkbox"/> Turbo Diesel Gas <input checked="" type="checkbox"/> Fuel Injectio |
| Transmission Type <input checked="" 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"/> Motorbelt <input checked="" type="checkbox"/> Driverside Airbag <input type="checkbox"/> 2-Point Bel <input checked="" type="checkbox"/> Passengerside Airbag | Cruise Control <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No |
| Drive Train <input checked="" type="checkbox"/> Front <input type="checkbox"/> Rear <input type="checkbox"/> 4-Wheel | Vehicle Type <input checked="" type="checkbox"/> Car <input type="checkbox"/> Van <input type="checkbox"/> Minivan <input type="checkbox"/> Other | <input type="checkbox"/> Sport UE <input type="checkbox"/> Truck <input type="checkbox"/> Motorcycle | Body Style <input checked="" 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 12341000 | Part Name(s) INTERIOR SYSTEMS:SEAT HEAD RESTRAINTS:INTEGRAL PART O | Location <input checked="" type="checkbox"/> Left <input checked="" type="checkbox"/> Front <input checked="" type="checkbox"/> Right <input checked="" type="checkbox"/> Rear | Failed Part(s) <input checked="" type="checkbox"/> Original <input type="checkbox"/> Replacement |
| No of Failures | Date(s) of Failure(s) 01-NOV-2002 Mileage at Failure(s) SINCE NEW 6-25-01 Vehicle Speed at Failure(s) | Failed Part(s) Available? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No | NHTSA Previously <input type="checkbox"/> Yes <input checked="" 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 Damage | Reported to Police <input type="checkbox"/> Yes <input type="checkbox"/> No | | |
| NARRATIVE DESCRIPTION OF FAILURE(S), INCIDENT(S), INJURY(IES) | | | |
| CONSUMER STATES THE HEADRESTS ARE DESIGN TOO HIGH, OBSTRUCTING THE VIEW OUT OF THE REAR WINDSHIELD WHEN BACKING UP. MR | | | |
| 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 this questionnaire. Your responses 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. | | | |

Narrative Description of Incident(s), Failure(s), Crash(es), and Injury(ies)

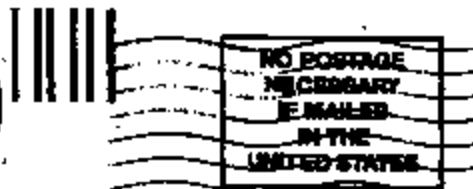
THIS CONDITION WAS REPORTED TO DEALER SHORTLY AFTER PURCHASE. DEALER STATED NO ADJUSTMENT, REPLACEMENT, REPAIR POSSIBLE. WHEN IN SERVICE SHOP I NOTED 2003 MODELS CAME WITH A MODIFIED HEADREST WHICH CORRECTED VISIBILITY PROBLEM WHEN BACKING UP. I REQUESTED REPLACEMENT OF MY ORIGINAL HEADRESTS. I WAS TOLD THERE WAS NO REPLACEMENT POSSIBLE. I REQUESTED TRIAL OF NEW HEADREST IN MY VEHICLE. IT WAS DETERMINED THE NEW STYLE HEADREST WOULD FIT MY CAR. I REQUESTED REPLACEMENT OF MY HEADRESTS AND WAS TOLD I COULD ORDER THE NEW HEADREST AT MY COST OF ABOUT \$3.00 A PIECE. I ORDERED TWO HEADRESTS BUT FELT I NEEDED THEM FOR SAFETY REASONS. I CALLED VOLVO'S WAGEN CONSUMER HOTLINE 1-800-833-8987. AND WAS TOLD THEY COULDN'T HELP ME. I WAS GIVEN A CASE # 20575501 AFTER I INSISTED ON A VERBAL OR WRITTEN REPLY AS OF THIS DAY MAILS BUT RECEIVED A REPLY.

U.S. Department of Transportation

National Highway Traffic Safety Administration

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

Official Business Penalty for Private Use \$300



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

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VEHICLE OWNER'S QUESTIONNAIRE

DOT AUTO SAFETY HOTLINE

TO REPORT VEHICLE SAFETY DEFECTS
COMPLETE THIS FORM
OR

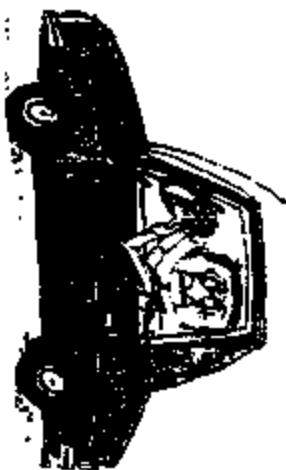
DASH2DOT

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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<http://www.nhtsa.dot.gov/ncsa>