

 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 758	
OWNER INFORMATION (Type or Print) 664420		Date Received 05-JAN-2001		Od or _____ rt dt _____ od rt _____ up tr _____ Reference No. 877477	
		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 ____/____/____					
VEHICLE INFORMATION					
Vehicle Ident. No. (VIN) (Located at bottom of windshield on driver's side) YV1LV60DXY2671285		Vehicle Make VOLVO		Vehicle Model V70	
		Vehicle Year 2000		Current Odometer Reading _____	
Purchase Date _____ ☒ New ☐ Used		Dealer's Name _____ City _____ State _____ Zip Code _____		Engine Siz (CID/CC/L) _____ No Cylinders _____ ☐ Turbo ☐ Diesel ☐ Gas ☐ Fuel Injectio	
Transmission Type ☐ Manual ☒ Automatic		Antilock Brakes ☒ Yes ☐ No		Restraint System ☐ 3-Point Bet ☐ Motorbelt ☐ Driverside Airbag ☐ 2-Point Bel ☐ Passengerside Airbag	
		Cruise Control ☒ Yes ☐ No		Drive Train ☐ Front ☐ Rear ☐ 4-Wheel	
		Vehicle Type ☐ Car ☐ Van ☐ Minivan ☐ Other _____		Body Style ☐ Sport Ult Truck ☐ Motorcycle ☐ 2-Door ☐ 4-Door ☐ Stationwagon ☐ Pick Up Truck	
FAILED COMPONENT(S)/PART(S) INFORMATION					
Component 07460000 05150022		Part Name(s) POWER TRAIN:AXLE ASSEMBLY ENGINE:GASKETS,OIL PAN		Location ☐ Left ☐ Right ☐ Front ☐ Rear	
				Failed Part(s) ☐ Original ☐ Replacement	
No of Failures _____		Date(s) of Failure(s) 20-DEC-2000 Mileage at Failure(s) 8000 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 FataIttle _____	
				Estimated Property Damag _____	
				Reported to Polic ☐ Yes ☒ No	
NARRATIVE DESCRIPTION OF FAILURE(S), INCIDENT(S), INJURY(IES)					
WHILE PULLING IN DRIVEWAY AT ABOUT 10 MP ROAD WAS SLIPPERY VEHICLE BUMPED INTO A CURB. THIS BROKE FRONT AXLE, THERE WAS NO BODY DAMAGE TO VEHICLE, OIL PAN WAS LEAKING. VOLVO CO. SAID CONSUMER LIED ABOUT ACCIDENT, AND THEY ARE NOT LIABLE.*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 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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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 1/19/2001			
VEHICLE INFORMATION			
Vehicle Ident. No. (VIN) (Located at bottom of windshield on driver's side) YV1LV60DXY2671286		Vehicle Make VOLVO	Vehicle Model V70
		Vehicle Year 2000	Current Odometer Reading _____
Purchase Date Oct. 1999 ☒ New ☐ Used	Dealer's Name Volvo Overseas City _____ State _____ Zip Code _____		Engine Size (CID/GG/L) _____ No Cylinders 5 ☐ 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 ☐ Sport Utl ☐ 2-Door ☐ Van ☐ Truck ☐ 4-Door ☐ Minivan ☐ Motorcycle ☐ Stationwagon ☐ Other _____ ☐ Pick Up Truck ☐ Other _____
FAILED COMPONENT(S)/PART(S) INFORMATION			
Component 07460000 05160022	Part Name(s) POWER TRAIN:AXLE ASSEMBLY ENGINE:GASKETS:OIL PAN	Location ☒ Left ☐ Right ☒ Front ☐ Rear	Failed Part(s) ☒ Original ☐ Replacement
No of Failures _____	Date(s) of Failure(s) 20-DEC-2000 Mileage at Failure(s) 8000 Vehicle Speed at Failure(s) _____	Failed Part(s) Available? ☐ Yes ☐ No	NHTSA Previously Contacted? ☐ 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 0	Number of Fatalities _____
		Estimated Property Damage _____	Reported to Police ☐ Yes ☒ No
NARRATIVE DESCRIPTION OF FAILURE(S), INCIDENT(S), INJURY(IES)			
WHILE PULLING IN DRIVEWAY AT ABOUT 10 MP ROAD WAS SLIPPERY VEHICLE BUMPED INTO A CURB. THIS BROKE FRONT AXLE, THERE WAS NO BODY DAMAGE TO VEHICLE, OIL PAN WAS LEAKING. VOLVO CO. SAID CONSUMER LIED ABOUT ACCIDENT, AND THEY ARE NOT LIABLE.*AK			
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