



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 336

Date Received

22-MAY-2001

Od_or _____
rt_dt _____
pd_rt _____
rp_lr _____

Reference No.

888869

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
WAUBA24B3XN026017		AUDI	A6	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
☐ Manual ☐ Automatic	☐ Yes ☒ No	☐ 3-Point Belt ☐ Driverside Airbag ☐ Passengerside Airbag ☐ Motorbelt ☐ 2-Point Belt	☐ Yes ☒ No	☐ Front ☐ Rear ☐ 4-Wheel	☐ Car ☐ Van ☐ Minivan ☐ Other
				☐ Sport Util ☐ Truck ☐ Motorcycle	
				☐ 2-Door ☐ 4-Door ☐ Stationwagon ☐ Pick Up Truck ☐ Other	

FAILED COMPONENT(S)/PART(S) INFORMATION

Component 03211000	Part Name(s) BRAKES:HYDRAULIC:PEDAL	Location ☐ Left ☐ Right ☐ Front ☐ Rear	Failed Part(s) ☐ Original ☐ Replacement
No of Failure 0	Date(s) of Failure(s) 22-MAY-2000 9000 Mileage at Failure(s) 0	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 0	Number of Fatalities 1	Estimated Property Damage	Reported to Police ☐ Yes ☒ No
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NARRATIVE DESCRIPTION OF FAILURE(S), INCIDENT(S), INJURY(IES)

BRAKES FAILED DUE TO BRAKE PEDAL MOUNTING BRACKET. DRIVER WAS UNABLE TO STOP VEHICLE, RESULTING IN A COLLISION AND FATALITY. *AK

COPIES OF THIS FORM ARE:

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
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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 335

Date Received

01 JUN -5 PM 12:15
22-MAY-2001

Od. or
rt. dt
od. rt
up. lit

Reference No.

888869

OWNER INFORMATION (Type or Print)

693420

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 1/1

VEHICLE INFORMATION

Vehicle Ident. No. (VIN) (Located at bottom of windshield on driver's side)

WAUBA24B3XN026017

Vehicle Make

AUDI

Vehicle Model

A5 QUADRO

Vehicle Year

1999

Current Odometer Reading

9200

Purchase Date

Dealer's Name

HEISHMAN - S

Engine Size

(CID/CC/L 2.8 cc.

☐ Turbo☐ Diesel☒ Gas☒ Fuel Injection☒ New ☒ Used

City ARLINGTON State VIRGINIA Zip Code

No Cylinders 8

Transmission Type

☐ Manual☒ Automatic

Antilock Brakes

☒ Yes☒ No

Restrain. System

☒ 3-Point Belt☐ Motorcst☒ Driverside Airbag☐ 2-Point Belt☒ Passengerside Airbag

Cruise Control

☒ Yes☒ No

Drive Train

☐ Front☐ Rear☒ 4-Wheel

Vehicle Type

☒ Car☐ Van☐ Minivan☐ Other☐ Sport Ult☐ Truck☐ Motorcycle

Body Style

☐ 2-Door☒ 4-Door☐ Stationwagon☐ Pick Up Truck☐ Other

FAILED COMPONENT(S)/PART(S) INFORMATION

Component

03211000

Part Name(s)

BRAKES:HYDRAULIC:PEDAL BRACKET

PART NO. 8D1-721-117-D

Location

☐ Left☐ Front☐ Right☐ Rear

Failed Part(s)

☒ Original☐ Replacement

No of Failures

1

Date(s) of Failure(s) 22-MAY-2000

Mileage at Failure(s) 9000

Vehicle Speed at Failure(s) 45 MPH

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

2
BOTH KILLED

Number of Fatalities

1

Estimated Property Damage

TOTAL LOSS
PHOTO INCURRED

Reported to Police

☒ Yes ☐ No

NARRATIVE DESCRIPTION OF FAILURE(S), INCIDENT(S), INJURY(IES)

BRAKES FAILED DUE TO BRAKE PEDAL MOUNTING BRACKET. DRIVER WAS UNABLE TO STOP VEHICLE, RESULTING IN A COLLISION AND FATALITY. *AK

NOTE: I AM INVESTIGATING THIS BRAKE PEDAL MOUNTING BRACKET FAILURE FOR MY CLOSE FRIEND TRICA A. SMITH WIFE OF EVAN A. KOPP WHO WAS KILLED IN THE ACCIDENT.

A.D. Zakarian

CONTINUE ON BACK IF NEEDED

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