



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 241

Date Received

29-MAY-2001

Od_or _____
rt_dt _____
pd_rt _____
rp_lr _____

Reference No.

889261

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) (Locate at bottom of windshield or driver's side)	Vehicle Make	Vehicle Model	Vehicle Year	Current Odometer Reading
PLEASE FILL IN	VOLKSWAGEN	NEW 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 ☐ Manual ☐ Automatic	Antilock Brakes ☒ Yes ☐ No	Restraint System ☒ 3-Point Belt ☐ Motorbelt ☐ Driverside Airbag ☐ 2-Point Bel ☐ Passengerside Airbag	Cruise Control ☐ Yes ☒ No
		Drive Train ☐ Front ☐ Rear ☐ 4-Wheel	Vehicle Type ☐ Car ☐ Sport Util ☐ Van ☐ Truck ☐ Minivan ☐ Motorcycle ☐ Other _____
			Body Style ☐ 2-Door ☐ 4-Door ☐ Stationwagon ☐ Pick Up Truck ☐ Other _____

FAILED COMPONENT(S)/PART(S) INFORMATION

Component 05450000 12420000	Part Name(s) ENGINE:OTHER PARTS INTERIOR SYSTEMS:INSTRUMENT PANEL:GAUGE:INDICATOR	Location ☐ Left ☐ Right ☐ Front ☐ Rear	Failed Part(s) ☐ Original ☐ Replacement
No of Failure 9	Date(s) of Failure(s) 10-APR-2000 22000 Mileage 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)

ONGOING PROBLEM WITH ENGINE CHECK LIGHT KEEP COMING ON. THIS HAS OCCURRED ON NINE OCCASIONS, AND VEHICLE STALLED OUT WHILE TRAVELING AT 40 MPH OR MORE ON TWO OCCASIONS. DEALER UNABLE TO LOCATE CAUSE. FEEL FREE TO PROVIDE US WITH ANY FURTHER INFORMATION CONCERNING THIS MATTER. *AK

COPIES OF REPORTS - FREE -

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) U.S. Department of Transportation National Highway Traffic Safety Administration NATIONWIDE 1-888-DASH-2-DOT 1-888-327-4236 www.nhtsa.dot.gov/hotline		FOR AGENCY USE ONLY 241 Date Received <u>29-MAY-2001</u> Date of <u>01 JUN 01</u> at <u>12:30</u> up <u>1:07</u> by <u>DEFECTS INVESTIGATION</u> Reference No. <u>889261</u> Work Number <u>[REDACTED]</u> Home Number <u>[REDACTED]</u>	
OWNER INFORMATION (Type or Print) 694274			
Do you authorize NHTSA to provide a copy of report to the manufacturer of your vehicle? ☒ YES ☐ NO In the absence of a signature, this form will not be forwarded to the vehicle manufacturer. Signature of Owner <u>[REDACTED]</u> Date <u>06/07/01</u>			
VEHICLE INFORMATION			
Vehicle Ident. No. (VIN) (Located at bottom of windshield or driver's side) 3VWBF61C4WM018345 PLEASE FILL IN		Vehicle Make VOLKSWAGEN	Vehicle Model NEW BEETLE
Vehicle Year 1998		Current Odometer Reading 22,900	
Purchase Date 30 JUNE 98 ☒ New ☐ Used	Dealer's Name NORTHTOWN VOLKSWAGEN City AMHERST State NY Zip Code 14226		Engine Size (CID/CC/L) 4 No. Cylinders 4 ☐ Turbo Diesel ☒ Gas ☐ Fuel Injection
Transmission Type ☒ Manual ☐ Automatic	Antilock Brakes ☒ Yes ☐ No	Restraint System ☒ 3-Point Belt ☐ Motorbelt ☒ Drivers de Airbag ☐ 2-Point Belt ☒ Passengers de Airbag	Cruise Control ☒ Yes ☐ No
Drive Train ☒ Front ☐ Rear ☐ 4-Wheel	Vehicle Type ☒ Car ☐ Sport Util ☐ Van ☐ Truck ☐ Min van ☐ Motorcycle ☐ Other	Body Style ☒ 2-Door ☐ 4-Door ☐ Stationwagon ☐ Pick Up Truck ☐ Other	
FAILED COMPONENT(S)/PART(S) INFORMATION			
Component 05150000 12420000	Part Name(s) ENGINE: OTHER PARTS INTERIOR SYSTEMS: INSTRUMENT PANEL: GAUGE: INDICATOR		Location ☐ Left ☐ Right ☐ Front ☐ Rear
Failed Part(s) ☒ Original ☒ Replacement	No of Failures 9		
Date(s) of Failure(s) <u>10-APR-2000</u> Mileage at Failure(s) <u>22000</u> 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 _____	Number of Fatalities _____
Estimated Property Damage _____		Reported to Police ☐ Yes ☒ No	
NARRATIVE DESCRIPTION OF FAILURE(S), INCIDENT(S), INJURY(IES)			
ONGOING PROBLEM WITH ENGINE CHECK LIGHT KEEP COMING ON. THIS HAS OCCURRED ON NINE OCCASIONS, AND VEHICLE STALLED OUT WHILE TRAVELING AT 40 MPH OR MORE ON TWO OCCASIONS. DEALER UNABLE TO LOCATE CAUSE. FEEL FREE TO PROVIDE US WITH ANY FURTHER INFORMATION CONCERNING THIS MATTER. *AK			
CONTINUE ON BACK IF NEEDED			
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Fold to show Return Address (no stamp needed) Fasten with tape or staple and mail																					
INFORMATION ON TIRE FAILURE(S) (IF APPLICABLE)																					
TIRE IDENTIFICATION NO.*																					
D	O	T																		MANUFACTURER/TIRE NAME	SIZE
* The identification number consists of 7 to 10 letters and numerals following the letters DOT. It is usually located near the rim flange on the side opposite the whitewall or on either side of a blackwall tire.																					
NARRATIVE DESCRIPTION (CONTINUED)																					

BETTER BUSINESS BUREAU HAS BEEN CONTACTED
AND A CUSTOMER CLAIM FORM HAS BEEN COMPLETED

U.S. Department of Transportation
National Highway Traffic Safety Administration
Information Management Staff NSA-10.01
400 7th Street, SW
Washington, DC 20590

