



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 1039

Date Received

14-NOV-2001

Od_or _____
rt_dt _____
pd_rt _____
rp_lr _____

Reference No.

899101

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)		Vehicle Make	Vehicle Model	Vehicle Year	Current Odometer Reading
WAUZL64B51N121413		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 Bel	☐ Yes ☒ No	☐ Front ☐ Rear ☐ 4-Wheel	☐ Car ☐ Van ☐ Minivan ☐ Other _____ ☐ Sport Utl ☐ Truck ☐ Motorcycle
				Body Style	
				☐ 2-Door ☐ 4-Door ☐ Stationwagon ☐ Pick Up Truck ☐ Other _____	

FAILED COMPONENT(S)/PART(S) INFORMATION

Component 03250000	Part Name(s) BRAKES:HYDRAULIC:ANTI-SKID SYSTEM	Location ☐ Left ☐ Right ☐ Front ☐ Rear	Failed Part(s) ☐ Original ☐ Replacement
No of Failure	Dates of Failure(s) _____ Mileage at Failure(s) _____ 5 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 Fatalities	Estimated Property Damag	Reported to Police ☐ Yes ☒ No
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NARRATIVE DESCRIPTION OF FAILURE(S), INCIDENT(S), INJURY(IES)

WHEN APPLYING BRAKESTHERE IS A LOW SCREECHING NOISE. THIS IS WHEN VEHICLE IS IN A STOPPING POSITION, AND GOING AT LOW SPEED. CONTACT DEALER, AND HAD NO RESPONSE.*AK

COPIES OF REPORTS ARE KEPT

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.

Form Approved: OMB No. 2127-0008

 DOT Auto Safety Hotline Vehicle Owner's Questionnaire (VOQ) U.S. Department of Transportation National Highway Traffic Safety Administration NATIONALWIDE 1-888-DASH-2-DOT 1-888-327-4236 www.nhtsa.dot.gov/hotline		FOR AGENCY USE ONLY 1039 Def. Rec'd. <u>yes</u> <u>PM</u> Date <u>NOV-2001</u> Qd. or <u>Adt</u> Qd. or <u>up</u> up <u>tr</u> Reference No. <u>[redacted]</u> Work Number <u>[redacted]</u> Home No. <u>[redacted]</u> Vehicle? <u>YES</u> <u>NO</u> Access to the vehicle manufacturer? <u>YES</u> <u>NO</u> Date <u>12/3/01</u>	
OWNER INFORMATION (Type or Print)			
Signature of Owner <u>[redacted]</u>			
Vehicle Ident. No. (VIN) (located at bottom of windshield on driver's side) WAUZL64B51N121413		Vehicle Make AUDI Vehicle Model A6 4.2 Vehicle Year 2001 Current Odometer Reading 645.00	
Purchase Date 8/31/01 ☒ New ☐ Used		Dealer's Name CHAMPION MOTORS City Pompano Beach State FL Zip Code 33064 Engine Size (CID) 255 No. Cylinders 8 ☐ Turbo ☐ Diesel ☐ Gas ☐ Fuel Injection	
Transmission Type ☐ Manual ☒ Automatic Antilock Brakes ☒ Yes ☐ No		Restraint System ☒ 3-Point Belt ☐ Motorbelt ☐ 2-Point Belt ☐ Driverside Airbag ☐ Passengerside Airbag Cruise Control ☒ Yes ☐ No Drive Train ☐ Front ☐ Rear ☒ Wheel	
Vehicle Type ☒ Car ☐ Sport Utility Truck ☐ Minivan ☐ Motorcycle ☐ Other		Body Style ☐ 2-Door ☐ 4-Door ☐ Station Wagon ☐ Pick Up ☐ Truck	
FAILED COMPONENT(S)/PART(S) INFORMATION			
Component 03250000 Part Name(s) BRAKES:HYDRAULIC:ANTI-SKID SYSTEM		Location ☐ Left ☐ Right ☐ Front ☐ Rear Failed Part(s) ☐ Original ☐ Replacement	
No. of Failures 1 Date(s) of Failure(s) 8/31/01 Mileage at Failure(s) 645 Vehicle Speed at Failure(s) 25		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 0 Estimated Property Damage 0 Reported to Police ☐ Yes ☒ No	
NARRATIVE DESCRIPTION OF FAILURE(S), INCIDENT(S), INJURY(IES)			
WHEN APPLYING BRAKES THERE IS A LOW SCREECHING NOISE. THIS IS WHEN VEHICLE IS IN A STOPPING POSITION, AND GOING AT LOW SPEED. CONTACT DEALER, AND HAD NO RESPONSE.*AK You need to push accelerator down between one + two inches to get any response. Horn does not respond consistently. Extreme pressure is required.			

CONTINUE ON BACK IF NEEDED

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U.S. Department of Transportation National Highway Traffic Safety Administration		Date Received: JAN 28 REFLECTS: NOV-2001 Od or rt dt: _____ od rt up_lfr: _____ Reference No.: 899101 Work Number: _____ Home Num: _____	
OWNER INFORMATION (Type or Print) 725972			
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: 12/3/01			
VEHICLE INFORMATION			
Vehicle Ident. No. (VIN) (Location: in bottom of windshield on driver's side) WAUZL64B51N121413		Vehicle Make AUDI	Vehicle Model A6 4.2
		Vehicle Year 2001	Current Odometer Reading 645.00
Purchase Date 8/31/01 ☒ New ☐ Used		Dealer's Name CHAMPION MOTORS City Pompano Beach State FL Zip Code 33064	
Engine Size 2.5 (CID/CCIL) 255 No Cylinders 4		☐ Turbo Diesel ☒ Gas ☐ Fuel Injection	
Transmission Type ☐ Manual ☒ Automatic	Anti-lock Brakes ☒ Yes ☐ No	Restraint System ☒ 3-Point Belt ☐ Motorbelt ☐ 2-Point Belt ☒ Driverside Airbag ☒ Passengerside Airbag	Cruise Control ☒ Yes ☐ No
Drive Train ☐ Front ☒ Rear ☐ 4-Wheel	Vehicle Type ☒ Car ☐ Van ☐ Minivan ☐ Other		Body Style ☐ Sport Util Truck ☒ 2-Door ☐ 4-Door ☐ Stationwagon ☐ Pick Up Truck
FAILED COMPONENT(S)/PART(S) INFORMATION			
Component 03250000	Part Name(s) BRAKES:HYDRAULIC:ANTI-SKID SYSTEM	Location ☐ Left ☐ Right ☐ Front ☐ Rear	Failed Part(s) ☐ Original ☐ Replacement
No of Failures _____	Date(s) of Failure(s) _____ Mileage at Failure(s) _____ Vehicle Speed at Failure(s) _____	Failed Part(s) ☐ Yes ☐ No	NHTSA Previous ☐ 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)			
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