



U.S. Department
of Transportation
National Highway
Traffic Safety
Administration

DOT Auto Safety Hotline
Vehicle Owner's Questionnaire
To Report Vehicle Safety Defects
1-888-DASH-2-DOT
(1-888-327-4236)
INTERNET: www.nhtsa.dot.gov/hotline

FOR AGENCY USE ONLY 111

Date Received

Repository ☐

14-JAN-2003

Reference No.
10003835

OFFICE
INVESTIGATION

OWNER INFORMATION (Type or Print)

Name

Address

City

NORTHBIDGE

State MA

Zip Code

Daytime Telephone Number

E-mail Address

Do you authorize NHTSA to provide a copy of this report to the manufacturer of your vehicle? ☐ YES ☒ NO
In the absence of an authorization, NHTSA WILL NOT provide your name or address to the vehicle manufacturer.

Signature of Owner _____ Date 1/1

VEHICLE INFORMATION

17 digit Vehicle Identification Number Located at bottom of windshield on driver's side

2HKRL1850X

Make

HONDA

Model

ODYSSEY

Model Year

1999

Date Purchased

12-99

Dealer's Name and Telephone Number

Lundgren Honda 508 833-6200

Engine:

No. Cylinders 6

Fuel Type:

Gas

Original Owner

☒

Dealer's City

Auburn

State

MA

Zip Code

01501

Transmission Type

AUTOMATIC

☒ Antilock Brakes

☒ Cruise Control

Powertrain

Vehicle Component Code

220000 SEATS

Multiple Failure: 1

FAILED COMPONENT(S)/PART(S) INFORMATION

Incident Date(s)

14-DEC-2002

Failure Mileage

116872

Failure Speed

0

ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A TIRE FAILURE

Tire Make

Tire Model (Name or Number)

Tire Size (Example P215/65R15)

DOT No. (Example: DOTM19A8C036)

☐ Original Equipment
☐ Prior Repair

Failure Location:

Tire Component Code

Tire Failure Type

ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A CHILD SEAT FAILURE

Make:

Date Manufactured:

Model No./Name:

Seat Type:

Installation System:

Child Seat Component Code:

Failed Part:

APPLICABLE INCIDENT INFORMATION

(Please describe in detail the incident(s), failure(s), crash(es), and injury(ies).)

Crash

☒ Yes ☐ No

Fire

☐ Yes ☒ No

Number of Persons Injured

4

Number of Deaths

0

Reported to Police

☒ Yes state police

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

Please describe (1) events leading up to the failure, (2) failure and its consequences, and (3) what was done to correct the failure; i.e., parts repaired or replaced (and if old part is available).

CONSUMER WAS REAR ENDED, AND BOTH FRONT SEATS OF THE DRIVER AND PASSENGER COLLAPSED ALONG WITH THE MIDDLE ROW SEAT BACKS. PLEASE DESCRIBE DETAILS. *JB

While stopped waiting for the car in front of me to turn, we were rear ended at 40mph. I we were pushed into the car in front of us. The air bags deployed, when we stopped we noticed the seats did collapse. I have photos being developed and have not received the police Report yet. Thankyou

Include, if available: Police/Fire Department Report, Photos, and Repair Invoice.

ATTACH ADDITIONAL SHEETS IF NECESSARY

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.