



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 100145

Date Received

Repository ☐

103 OCT 2003

Reference No.
10042837

OWNER INFORMATION (Type or Print)

Name

Address

City

MANSFIELD

State OH

Zip Code

Daytime Telephone Number

E-mail Address

Evening Telephone Number

SAME

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 10/24/03

VEHICLE INFORMATION

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

2HKRL186 K2H534325

Make
HONDA

Model
ODYSSEY

Model Year
2002

Date Purchased

JAN 10 - 2002

Dealer's Name and Telephone Number

WHITE'S HONDA 419-529-4000

Engine:

No. Cylinders

4

Fuel Type:

GAS

Original Owner

☒

Dealer's City

MANSFIELD

State

OH

Zip Code

44906

Transmission Type

AUTO

☒ Antilock Brakes

☒ Cruise Control

Powertrain

Vehicle Component Code

141100 AIR BAGS:FRONTAL:SENSOR/CONTROL MODULE

Multiple Failure: 1

FAILED COMPONENT(S)/PART(S) INFORMATION

Incident Date(s)
14-OCT-2003

Failure Mileage
14,266

Failure Speed
N/A

SRS (AIR BAG LIFE) CAME ON
INTERMITTENTLY & ALSO STAYED
ON SEVERAL TIMES.

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: DOTM19ABC038)

☐ 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

Number of Deaths

Reported to Police

N

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).

AIR BAG SENSOR LIGHT STAYS ON. CONSUMER IS CONCERNED THAT AIR BAG WILL NOT DEPLOY UPON IMPACT. *AK

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.

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

LITE ORIGINALLY CAME ON INTERMITTENTLY & STAYED ON
FOR HOURS. EVENTUALLY IT CAME ON FULL TIME.
IT HAS COME ON AGAIN AFTER THE 7TH SERVICE
TWICE. HERE ARE SERVICE VISITS & RESULTS:

- (1) JUNE 4, 02 - LITE RESET
- (2) JULY 10, 02 - LITE RESET
- (3) AUG 1, 02 - SENSOR REPLACED
- (4) APRIL 22, 03 - RESET LITE
- (5) JUNE 24, 03 - RESET LITE
- (6) JULY 18, 03 - SENSOR REPLACED (CAME ON AGAIN)
- (7) JULY 18, 03 - RESET LITE

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U.S. Department
of Transportation

National Highway
Traffic Safety
Administration

400 Seventh St., S.W.
Washington, D.C. 20590

Official Business
Penalty for Private Use \$300

BUSINESS REPLY MAIL

FIRST CLASS PERMIT NO 73173 WASHINGTON, D.C.

POSTAGE WILL BE PAID BY NATL. HWY. TRAFFIC SAFETY ADMIN.

U.S. Department of Transportation
National Highway Traffic Safety Administration
Office of Defects Investigation, NVS-216
400 7th Street, SW
Washington, DC 20590

NO POSTAGE
NECESSARY
IF MAILED
IN THE
UNITED STATES

**VEHICLE
OWNER'S
QUESTIONNAIRE**

DOT AUTO SAFETY HOTLINE

TO REPORT VEHICLE SAFETY DEFECTS
COMPLETE THIS FORM

OR

DASH2DOT

and dial toll free at

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1-888-327-4236

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(DASH) 2 DOT



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