



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 231

Date Received
19 ~~04~~ FEB 19 04

Repository
Reference No.
10053476

OWNER INFORMATION (Type or Print)

Name [Redacted]
Address [Redacted]
City MANSFIELD State TX Zip Code [Redacted]

Daytime Telephone Number [Redacted] E-mail Address [Redacted]
Evening Telephone Number [Redacted]

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 [Redacted] Date 1/21/04

VEHICLE INFORMATION

17 digit Vehicle Identification Number [Redacted] Make HONDA Model ACCORD Year 1998
Date Purchased 1998 Dealer's Name and Telephone Number Jim McArthur
Original Owner [Redacted] Dealer's City DeSoto State TX Zip Code [Redacted]
Transmission Type auto Antilock Brakes Cruise Control Powertrain [Redacted]
Vehicle Component Code 103300 POWER TRAIN: AUTOMATIC TRANSMISSION: GEAR POSITION Multiple Failure: 1

FAILED COMPONENT(S)/PART(S) INFORMATION

Incident Date(s) 4/2004, 8/2007, 8/2008 Failure Mileage [Redacted] Failure Speed [Redacted] *could not get gear out of park without using manual release. Brake switch replaced to fix issue.*

ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A TIRE FAILURE

Tire Make [Redacted] Tire Model (Name or Number) [Redacted] Tire Size (Example P216/66R16) [Redacted]
DOT No. (Example: DOTM19ABC036) Original Equipment Prior Repair Failure Location: [Redacted]
Tire Component Code [Redacted] Tire Failure Type [Redacted]

ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A CHILD SEAT FAILURE

Make: [Redacted] Date Manufactured: [Redacted] Model No./Name: [Redacted]
Seat Type: [Redacted] Installation System: [Redacted]
Child Seat Component Code: [Redacted] Failed Part: [Redacted]

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 [Redacted] Number of Deaths [Redacted] 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).

GEAR SHIFT WOULD NOT SHIFT OUT PARK, CAUSING THE CONSUMER TO DEPRESS THE MANUAL RELEASE BUTTON IN ORDER TO RELEASE THE GEAR SHIFT. *AK

This problem also caused my brake lights to not work. Replaced Brake switch to resolve problem.

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.