



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-5111
(1-888-327-4236)
INTERNET: www.nhtsa.dot.gov/hotline

FOR AGENCY USE ONLY 100222

Date Received: 17-SEP-2004
Repository:
Reference No.: 10092885

OWNER INFORMATION (Type or Print)

Name: [REDACTED]
Address: [REDACTED]
City: HOLLYWOOD State: FL 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: _____ Date: 9/17/04

VEHICLE INFORMATION

17 digit Vehicle Identification Number Located at bottom of windshield on driver's side: 2HKYF18883H [REDACTED]
Make: HONDA Model: PILOT Model Year: 2003
Date Purchased: June 2002 Dealer's Name and Telephone Number: Rick Case Honda
Original Owner: Dealer's City: _____ State: FL Zip Code: _____ Engine No./Cylinders: 6 Fuel Type: Gas
Transmission Type: AUTOMATIC Antilock Brakes Cruise Control Powertrain: 4 WHEEL DRIVE
Vehicle Component Code: 141100 AIR BAGS:FRONTAL:SENSOR/CONTROL MODULE
Multiple Failure: 1

FAILED COMPONENT(S)/PART(S) INFORMATION

Incident Date(s): 10-SEP-2004 Failure Mileage: 50488 Failure Speed: _____

ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A TIRE FAILURE

Tire Make: _____ Tire Model (Name or Number): _____ Tire Size (Example P215/65R16): _____
DOT No. (Example: DOTM18ABC030): _____ 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: 0 Number of Deaths: 0 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 LIGHT CAME ON. DEALER STATED THAT THE COST MAY NOT BE COVERED UNDER WARRANTY.*AK
The SRS light came on. This was a recall item last year. Rick Case Honda inspected the vehicle and said a sensor went bad under passenger seat and needed to be replaced. I paid \$348.00 for a replaced sensor wire. The service advisor said that had nothing to do with the recall. I have talked to other Honda owners who also have their SRS light on. Should this be a recall item again?

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.

**THE ATTACHMENTS TO THIS
DOCUMENT HAVE BEEN REMOVED
TO PROTECT UNWARRANTED
INVASION OF PERSONAL PRIVACY
PURSUANT TO EXEMPTION 6 OF
THE FREEDOM OF INFORMATION
ACT (FOIA), 5 U.S.C. 552(b)(6).**