



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](http://www.nhtsa.dot.gov/hotline)

FOR AGENCY USE ONLY

Date Received

Od\_or \_\_\_  
rt\_dt \_\_\_  
od\_rt \_\_\_  
up\_ltr \_\_\_

SEP 21 AM 9:04

Reference No.

10094477

## OWNER INFORMATION (Type or Print)

Name \_\_\_\_\_  
Street No. \_\_\_\_\_ Apt. No. \_\_\_\_\_  
City Palm Beach Gardens State FL

Daytime Telephone Number \_\_\_\_\_

Do you authorize NHTSA to provide a copy of this report to the manufacturer of your vehicle?  YES  NO  
In the absence of an authorized signature, you are authorizing us to use your name or address to the vehicle manufacturer.

Signature of Owner Date 9/13/04

## PRODUCT INFORMATION

Vehicle Identification No. (VIN.) (17 Digits) <u>JH4KA9657YL</u>		Make <u>Acura</u>	Model <u>RL</u>	Year <u>2000</u>	
Purchased Date <u>12/2000</u>	Dealer's Name <u>Palm Beach Acura</u>		Engine Size (CID/CC/L)	<input type="checkbox"/> Turbo <input type="checkbox"/> Diesel <input type="checkbox"/> Gas <input type="checkbox"/> Fuel Injection	
<input checked="" type="checkbox"/> New <input type="checkbox"/> Used	Dealer's City <u>West Palm Beach</u>	State <u>FL</u>	Zip Code	No. Cylinders	
Manufacture Date (on driver's door or pillar)	Transmission Type <input type="checkbox"/> Manual <input checked="" type="checkbox"/> Automatic	Restraint System <input checked="" type="checkbox"/> Driverside Air Bag <input type="checkbox"/> Motorbelt <input checked="" type="checkbox"/> Passengerside Air Bag <input type="checkbox"/> 2-Point Belt <input type="checkbox"/> 3-Point Belt	Cruise Control <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Drivetrain <input type="checkbox"/> Front <input type="checkbox"/> Rear <input type="checkbox"/> 4-Wheel	Vehicle Type <input checked="" type="checkbox"/> Car <input type="checkbox"/> Sport Utility <input type="checkbox"/> Van <input type="checkbox"/> Truck <input type="checkbox"/> Minivan <input type="checkbox"/> Motorcycle <input type="checkbox"/> Other
Body Style <input type="checkbox"/> 2-Door <input checked="" type="checkbox"/> 4-Door <input type="checkbox"/> Stationwagon <input type="checkbox"/> Pick Up Truck <input type="checkbox"/> Other					

## FAILED COMPONENT(S)/PART(S) INFORMATION

Part Name(s) <u>electrical system</u> <u>driver air bag</u>	Location <input checked="" type="checkbox"/> Left <input type="checkbox"/> Right <input type="checkbox"/> Front <input type="checkbox"/> Rear	Failed Part(s) <input checked="" type="checkbox"/> Original <input type="checkbox"/> Replacement	Handicap Adaptive Equip <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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## TO BE COMPLETED WHEN REPORTING A TIRE FAILURE

Tire Brand	Tire Name				
Complete Tire Size	DOT No.				
No. of Failures	Date(s) of Failure(s)	Mileage at Failure(s)	Vehicle Speed at Failure(s)	Failed Part(s) Available? <input type="checkbox"/> Yes <input type="checkbox"/> No	NHTSA Previously Contacted? <input type="checkbox"/> Yes <input type="checkbox"/> No

## APPLICABLE INCIDENT INFORMATION

(Please describe in detail the incident(s), Failure(s), Crash(es), and Injury(ies). Attach photos if available.)

Crash <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Fire <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Number of Persons Injured <u>0</u>	Number of Fatalities <u>0</u>	Reported to Manufacturer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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Narrative Description of incident(s), Failure(s), Crash(es), and Injury(ies). Hit vehicle stopped in turning lane in rainstorm at 30-35 mph. Insurance adjuster (AUG) estimated damage at \$9500 - \$10,000. (Auto body shop repaired. Dealer claimed multiple electrical and other serious problems due to "multiple" crashes/accidents. Only one crash and dealer refused to provide list of problems so insurance could be notified. Air bag did not deploy. Dealer would not put anything in writing.

Continue on back.

The Privacy Act of 1974 - Public Law 93-579 This information is requested pursuant to a 49 U.S.C. Chapter 301. You are under no obligation to respond to this questionnaire. Your response may be used to assist NHTSA in determining whether a manufacturer should take appropriate action to correct a safety defect. If NHTSA proceeds with administration 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)**

This car was taken to PB Acura shortly after repairs were complete. Technicians, manager, no one mentioned any electrical system problems in 2002. Also, technician did not check air bag. Acura over- heated due to defective radiator and technician would not report correct information on invoice. At this time, summer 2003, Acura decided that car had many, many, problems although still under warranty. I fear car is unsafe and I cannot get dealership to fix problems.

ATTACH ADDITIONAL SHEETS IF NECESSARY

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



NO POSTAGE  
NECESSARY  
IF MAILED  
IN THE  
UNITED STATES

**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, NSA-10.01  
400 7th Street, SW  
Washington, DC 20590



Complete and return or place in your car manual for future use



**VEHICLE  
OWNER'S**

**QUESTIONNAIRE  
(V00Q)**

**DOT AUTO SAFETY HOTLINE**

TO REPORT VEHICLE SAFETY DEFECTS  
COMPLETE THIS FORM  
OR

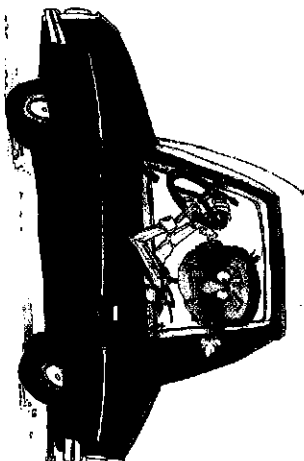
**DASH 2 DOT**

and dial toll free at

**1-888-DASH-2-DOT**

**1-888-327-4236**

DOT Auto Safety Hotline  
(DASH) 2 DOT



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Administration

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[REDACTED]

9/13/04

**Attachment:**

Please note copy of service order dated 8/08/03. This was written as routine servicing. However, the dealership had serviced my car shortly after the repairs were made in August, 2002 and did not mention electrical problems. The only accident that this car was involved in happened in July, 2002. I mentioned the air bag and pointed out that it had not deployed at the time of the impact but the technician was not concerned.

Following this service, my car experienced a radiator problem. It was then that the dealership mentioned, in writing on the invoice but not verbally, that the car had extensive electrical problems due to MULTIPLE ACCIDENTS. There were no multiple accidents.

I called and wrote the dealership trying to get someone to acknowledge and estimate the electrical damages which would have been covered as "item(s)" missed by the damage estimator and covered under our insurance. No return call. No response. I even tried to stop the payment for the repair work but got no where with that. The dealership has been paid in full but I fear for my families' life driving a car which has an airbag that will not deploy and "severe" electrical problems which could cause a fire.

If you need additional information, please let me know.

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).