



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 100748

Date Received

Repository

2005 NOV 28 AM 9
07-NOV-2005

Reference No.
10141894

OWNER INFORMATION (Type or Print)

Name [REDACTED]
Address [REDACTED]
City VERNON HILLS State IL Zip Code [REDACTED]

Daytime Telephone Number [REDACTED] E-mail Address [REDACTED]

Evening Telephone Number
847-362-8050

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, please provide your name or address to the vehicle manufacturer.
Signature of Owner [REDACTED] Date 11/17/05

VEHICLE INFORMATION

17 digit Vehicle Identification Number Located at bottom of windshield on driver's side
1BUJA58 [REDACTED] Make ACURA Model 3.2TL Model Year 2001
Date Purchased 28-NOV-04 Dealer's Name and Telephone Number ZIMMERMAN FORD Engine: No. Cylinders 6 Fuel Type: Gas
Original Owner Dealer's City SHOREWOOD State IL Zip Code [REDACTED]
Transmission Type AUTOMATIC Anti-lock Brakes Cruise Control Powertrain FRONT WHEEL DRIVE Vehicle Component Code 021540 SUSPENSION:FRONT:CONTROL ARM:LOWER BALL JOINT
Multiple Failure: 1

FAILED COMPONENT(S)/PART(S) INFORMATION

Incident Date(s) 07 NOV-2005
03 Failure Mileage 119,000 Failure Speed 15

ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A TIRE FAILURE

Tire Make [REDACTED] Tire Model (Name or Number) [REDACTED] Tire Size (Example P215/65R15)
DOT No. (Example: DOTM1A9ABC036) 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 check all that apply: Crash(es), Fire, Deaths, and Injuries)

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).

IT: THE CONTACT STATED THE FRONT RIGHT LOWER BALL JOINT FAILED WHILE DRIVING. THE BALL JOINT CAME APART, CAUSING THE COLLAPSE OF THE SUSPENSION, AND LOSS OF CONTROL OF THE VEHICLE. THE SPEED WAS AROUND 10-15 MPH. HE HAS TAKEN THE VEHICLE TO THE SERVICE DEALER FOR REPAIRS. THE MANUFACTURER HAS NOT BEEN CONTACTED AT THIS POINT, BUT WILL BE LATER TODAY. *AK
FOLLOW-UP PER OWNER: VEHICLE TOWED TO ACURA OF LIBERTYVILLE, 1620 S. MINNAWEE AVE., LIBERTYVILLE IL. 60248. REPAIR ORDER # 62713 OPENED 11/3/05. AMERICAN HONDA NOTIFIED 11/8/05; CASE # NC32005-11-0701620 OPENED. PART FAILURE WAS # 51210-584-A02 (SUPERCEDED BY ACURA PART # 51210-584-305) AND WAS REPLACED.

Include, if available: Police/Fire Department Report, Photos, and Repair Invoice. ATTACH ADDITIONAL SHEETS IF NECESSARY

The Privacy Act of 1974 (Public Law 93-502) 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.