



U.S. Department of Transportation  
National Highway Traffic Safety Administration

# Vehicle Owner's Questionnaire

TO REPORT VEHICLE SAFETY DEFECTS

888-327-4236

www.safercar.gov

**FOR AGENCY USE ONLY**

Date Received <b>07-06-07</b>	Repository <input type="checkbox"/>
Reference No. <b>10190939</b>	
Daytime Telephone Number [Redacted]	
Evening Telephone Number <b>SAME</b>	
E-mail [Redacted]	

**OWNER INFORMATION (Type or Print)**

Name: [Redacted]  
 Street No: [Redacted] Apt. No.: [Redacted]  
 City: **UNION** State: **NY**  
 Do you authorize NHTSA to provide a copy of this report to the manufacturer of your vehicle?  YES  NO  
 In the absence of authorization, the manufacturer only during a defect investigation or when you make a complaint about recall performance on your vehicle.  
 Signature of Owner: [Redacted] Date: **06/09/2007**

**VEHICLE INFORMATION**

17 digit Vehicle Identification number located at bottom of windshield on driver's side: [Redacted]  
 Make: **HONDA** Model: **CIVIC** Year: [Redacted] Current Mileage: **3800**  
 Date Purchased: [Redacted] Dealer's Name and Telephone Number: [Redacted] Engine: [Redacted] Fuel Type:  Gas  Diesel  Hybrid  Other  
 Original Owner Dealer's City: [Redacted] State: [Redacted] Zip Code: [Redacted] No. Cylinders: **4**  
 Transmission Type:  Automatic  Manual Antilock Brakes  Cruise Control Powertrain:  All-Wheel Drive  Front-Wheel Drive  Rear-Wheel Drive  Four-Wheel Drive

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

Component Name	Incident Date(s)	Failure Mileage	Failure Speed	Failure Location
				<input type="checkbox"/> Driver <input type="checkbox"/> Passenger <input type="checkbox"/> Front <input type="checkbox"/> Rear

**ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A TIRE FAILURE**

Tire Make/Brand: [Redacted] Tire Model/Line: [Redacted] Tire Name: [Redacted] Tire Size (Example: P215/65R1105): [Redacted]  
 Failed Structure:  Tread  Sidewall  Bead DOT No. (Example: DOT MAL9ABC036 on sidewall)  Original Equipment  Prior Repair  
 Failure Type:  Blowout  Blister  Crack  Torn  Tread Separation  Road Hazard  Out of Round

**ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A CHILD SEAT FAILURE**

Make: [Redacted] Date Manufactured: **2004** Model Number and Name: [Redacted]  
 Seat Type:  Infant  Booster  Integrated  Convertible  Other  
 Failed Part. Describe Failure Below:  Base  Harness/Buckle  LATCH Connector  Shell  Handle  Other  
 Installed in Vehicle using the:  Vehicle safety belt  LATCH system\*  
\*Vehicle info required

**APPLICABLE INCIDENT INFORMATION**

(Please describe in detail the Incident(s), Failure(s), Crash(es), and Injury(ies).)

Crash:  Yes  No Fire: **SUGAR**  Yes  No Number of Persons Injured: **1** Number of Deaths: **0** Police Report No.: **UNION POLICE NY**

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

**REP. # 10192143 NYS-216 nlm (NHTSA),  
 THE HONDA CIVIC SELF-ACCELERATED UP TO  
 80 MPH WITHIN 10 SECONDS, BPA VES FAILED.**

Mail