



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

FOR AGENCY USE ONLY 100148

Date Received

Repository

02-OCT-2007

Reference No.
10204674

OWNER INFORMATION (Type or Print)

Name [REDACTED]
 Address [REDACTED]
 City ANN ARBOR State MI 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 authorized signature, please provide your name or address to the vehicle manufacturer.
 Signature of Owner [REDACTED] Date 10/15/07

VEHICLE INFORMATION

17 digit Vehicle Identification Number Located at bottom of windshield on driver's side: 2HGFG12606H [REDACTED]
 Make HONDA Model CIVIC Model Year 2006

Date Purchased 04-JUL-06 Dealer's Name and Telephone Number Victory Honda
 Engine: No: Cylinders 4 Fuel Type: Gas

Original Owner Dealer's City Plymouth State MI Zip Code [REDACTED]

Transmission Type AUTOMATIC Antilock Brakes Cruise Control
 Powertrain FRONT WHEEL DRIVE Vehicle Component Code 030000 SERVICE BRAKES, HYDRAULIC
 Multiple Failure: 8

FAILED COMPONENT(S)/PART(S) INFORMATION

Incident Date(s) 01-DEC-2006 Failure Mileage 10000 Failure Speed [REDACTED]

ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A TIRE FAILURE

Tire Make [REDACTED] Tire Model (Name or Number) [REDACTED] Tire Size (Example P215/65R15) [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 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).

TL*THE CONTACT OWNS A 2006 HONDA CIVIC. THE CONTACT STATED THAT THE BRAKE PEDAL WAS DIFFICULT TO DEPRESS WHEN THE VEHICLE WAS COLD. AS A RESULT, THE STOPPING DISTANCE INCREASED. THE DEALER INSPECTED THE VEHICLE ON TWO OCCASIONS, BUT WERE UNABLE TO DIAGNOSE THE FAILURE. AS OF OCTOBER 2, 2007, THE FAILURE CONTINUED INTERMITTENTLY. THE SPEED WAS UNKNOWN. THE FAILURE MILEAGE WAS 10,000 AND CURRENT MILEAGE WAS 20,000.

* PROBLEM HAPPENS
 BACKING OUT OF
 GARAGE & DOWN
 THE DRIVEWAY

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.