



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 100148

Date Received **PM 3:08**  
26-NOV-2007  
Repository   
Reference No. 10209891

**OWNER INFORMATION (Type or Print)**

Name [REDACTED]  
Address [REDACTED]  
City ANCHORAGE State AK 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 address to the vehicle manufacturer.  
Signature of Owner [REDACTED] Date **12/22/07**

**VEHICLE INFORMATION**

17 digit Vehicle Identification Number Located at bottom of windshield on driver's side: JHLRD78844C [REDACTED]  
Make HONDA Model CR-V Model Year 2004  
Date Purchased 01-SEP-06 Dealer's Name and Telephone Number **Continental Auto** Engine: No: Cylinders **4** Fuel Type: Gas  
Original Owner  Dealer's City **ANCHORAGE** State **AK** Zip Code **99503**  
Transmission Type AUTOMATIC  Antilock Brakes  Cruise Control Powertrain 4 WHEEL DRIVE Vehicle Component Code 141000 AIR BAGS:FRONTAL Multiple Failure: 1

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

Incident Date(s) 01-MAR-2007 Failure Mileage ~~22500~~ **30,000** Failure Speed 0

**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 2004 HONDA CR-V. THE SRS WARNING LIGHT ILLUMINATED. THE DEALER STATED THAT THE CABLE REEL FAILED AND THEY REPLACED THE CABLE REEL. THERE HAD BEEN NO FURTHER OCCURRENCES. THE MANUFACTURER STATED THAT HIS VIN WAS NOT INCLUDED IN NHTSA CAMPAIGN ID NUMBER 04V255000 (AIR BAGS: FRONTAL). THE FAILURE MILEAGE WAS ~~22,500~~ AND CURRENT MILEAGE WAS 35,249. **30,000**

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.

11/10/07

ANCHORAGE, AK

# Continental Auto, LLC



5001 Old Seward Hwy  
Anchorage, AK 99503  
907-261-2160  
www.buyatcontinental.com



SERVICE ADVISOR JOHN 'KEONI' HELLER

REPAIR ORDER WRITTEN	DATE READY	STOCK NO.	VEHICLE IDENTIFICATION	CUST. NO.	TAG NO.	P.O. NO.	INVOICE PRINTED	INVOICE NO.
06NOV07	21NOV07	50677-1	JHLRD78844				21NOV07	263216
TIME IN	TIME READY	YEAR	MAKE & MODEL	TELEPHONE NO.	COST PAY LABOR RATE	DELIVERY DATE	PREPARED BY	S/A
05:53	11:10	04	HONDA CR-V		95.00	08SEP06	300	300
MILEAGE IN	MILEAGE OUT	LICENSE NO.						
35249	35249							

A CUSTOMER STATES SRS LIGHT IS ON.  
DIAGNOSE/ADVISE.  
99 DIAGNOSED COMPLAINT, PULLED CODES 01-1 DRIVERS SIDE AIRBAG OPEN. RECOMMEND CABLE REEL 1ST. MAY NEED ADDITIONAL REPAIRS.  
328 CH 1.00 95.00 95.00  
99 REMOVED AND REPLACED CABLE REEL, ONE TIME GOODWILL PER MARK MARTIN 11-13-07 3PM.  
328 WH3 2.00 (N/C)  
1 77900-S5A-A14  
\*77900-S5A-999 (N/C)

B\*\* ONETIME GOODWILL REPLACEMENT OF SRS CONTROL UNIT AND CABLE REEL.  
99 SRS CONTROL UNIT NOT NEEDED, OPERATION NORMAL AFTER CABLE REEL INSTALLATION.  
300 CH 0.00 0.00 0.00

\*\* PRE-INVOICE \*\*

DESCRIPTION	TOTALS
LABOR AMOUNT	95.00
PARTS AMOUNT	0.00
GAS,OIL, LUBE	0.00
SUBLET AMOUNT	0.00
MISC. CHARGES	0.00
TOTAL CHARGES	95.00
LESS DISCOUNT	0.00
SALES TAX	0.00
PLEASE PAY THIS AMOUNT	95.00

**STATEMENT OF DISCLAIMER**  
The factory warranty constitutes all of the warranties with respect to the sale of this item/items. The Seller hereby expressly disclaims all warranties, either express or implied, including any implied warranty of merchantability or fitness for a particular purpose. Seller neither assumes nor authorizes any other person to assume for it any liability in connection with the sale of this item/items.

CUSTOMER SIGNATURE

THANK YOU FOR YOUR PATRONAGE!  
IF YOU HAVE ANY QUESTIONS OR CONCERNS REGARDING YOUR SERVICE, PLEASE DON'T HESITATE TO CALL!  
261.2160

ALL TIRE FEES HAVE BEEN PREVIOUSLY PAID.

*Called Home # @  
11:10 AM  
No Answer!!!*

CUSTOMER COPY