



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

Date Received <b>JAN 28 2011</b> 10-NOV-2010	Repository <input type="checkbox"/>
	Reference No. 10365225

OWNER INFORMATION (Type or Print)			
Name	[REDACTED]		
Address	[REDACTED]		
City	UPPER MALBORO	State	MD
		Zip Code	[REDACTED]
Daytime Telephone Number		E-mail Address	
[REDACTED]			
Evening Telephone Number			

The information you provide will be used to identify potential safety-related defects. We may share your information with the applicable vehicle manufacturer during an investigation or recall in accordance with the routine uses described in the agency's Privacy Act notice. See 49 FR 53971 (Sep. 3, 2004).

**VEHICLE INFORMATION**

17 digit Vehicle Identification Number Located at bottom of windshield on driver's side 5J6YH18554L [REDACTED]		Make HONDA	Model ELEMENT	Model Year 2004
Date Purchased 10/9/04	Dealer's Name and Telephone Number Honda of Bowie 301-218-2111		Engine: No: Cylinders 4	Fuel Type: Unleaded
Original Owner <input type="checkbox"/>	Dealer's City Bowie, Maryland	State MD	Zip Code 20716	
Transmission Type	<input checked="" type="checkbox"/> Antilock Brakes <input type="checkbox"/> Cruise Control	Powertrain	Multiple Failure:	Incident Date(s) 09-NOV-2010

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

Vehicle Component Code: 130000 VISIBILITY	Failure Mileage 22300	Failure Speed 0
---	--------------------------	--------------------

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

Tire Make	Tire Model (Name or Number)	Tire Size (Example P215/65R15)
DOT No. (Example: DOTMAL9ABC036)	<input type="checkbox"/> Original Equipment <input type="checkbox"/> Prior Repair	Failure Location:
Tire Component Code	Tire Failure Type:	

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

Make:	Date Manufactured:	Model No./Name:
Seat Type:	Installation System:	
Child Seat Component Code:	Failed Part:	

**APPLICABLE INCIDENT INFORMATION**

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

Crash <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Fire <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Number of Persons Injured	Number of Deaths	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 ELEMENT. THE CONTACT STATED THAT THE FRONT PASSENGER SIDE WINDOW FELL DOWN AND WILL NOT CLOSE. THE MOTOR IN THE WINDOW WAS MOVING, BUT THE WINDOW WOULDN'T. THE DEALER STATED THAT THE WINDOW WAS NOT COVERED BY THE WARRANTY OR ANY RECALLS. THE CONTACT WAS CONCERNED SINCE VEHICLE WAS NOT SECURE WITH THE WINDOW STUCK IN THE OPEN POSITION. THE FAILURE AND CURRENT MILEAGES WERE 22300.

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 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.