



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
FEB 07 2011
17-NOV-2010

Repository
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OWNER INFORMATION (Type or Print)

Name [REDACTED]
Address [REDACTED]
City COLUMBUS State OH Zip Code [REDACTED]

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

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
1HGCM56336A [REDACTED] Make HONDA Model ACCORD Model Year 2006
Date Purchased Dealer's Name and Telephone Number Engine: No: Cylinders Fuel Type:
Original Owner Dealer's City State Zip Code
Transmission Type Antilock Brakes Powertrain Multiple Failure: Incident Date(s) 16-NOV-2010
 Cruise Control

FAILED COMPONENT(S)/PART(S) INFORMATION

Vehicle Component Code: 180000 VEHICLE SPEED CONTROL Failure Mileage 45073 Failure Speed 25

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: DOTM9ABC036) Original Equipment Failure Location:
 Prior Repair
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 Yes No Fire Yes 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 2006 HONDA ACCORD. WHILE DRIVING 25 MPH, THE ENGINE BEGAN SURGING UP AND DOWN ALTHOUGH THE CONTACT'S FOOT WAS ON THE BRAKE PEDAL. THE CONTACT PULLED OVER AND TURNED THE ENGINE OFF, BUT THE VEHICLE CONTINUED SURGING. THE VEHICLE WAS TOWED TO A REPAIR SHOP WHERE THE CONTACT WAS INFORMED THAT THE THROTTLE ACTUATOR CONTROL SYSTEM IDLE POSITION WAS DEFECTIVE; THE MECHANIC RESET THE COMPUTER. ~~NEITHER THE DEALER NOR THE MANUFACTURER HAD BEEN NOTIFIED.~~ THE FAILURE MILEAGE WAS 45,073. **BOTH AND HAS**

HONDA DEALER CHECKED OUT THE CAR, BUT COULD NOT DUPLICATE THE PROBLEM. THEREFORE, THERE WAS NOTHING THEY COULD DO UNTIL IT HAPPENS AGAIN.

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.