Form Approved: O.M.B. No. 2127-0008

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: 06-DEC-2010	Repository ☐
	Reference No.: 10369337

OWNER INFORMATION (Type or Print)

Name [redacted]		Daytime Telephone Number [redacted]	E-mail Address [redacted]
Address [redacted]		Evening Telephone Number	
City: FREWSBURG	State: NY	Zip Code: [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	Make	Model	Model Year
4S6CM58W6X4[redacted]	HONDA	PASSPORT	1999

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 ☐ Cruise Control	Powertrain	Multiple Failure:	Incident Date(s): 30-NOV-2010

FAILED COMPONENT(S)/PART(S) INFORMATION

Vehicle Component Codes: 030000 SERVICE BRAKES, HYDRAULIC, 031000 SERVICE BRAKES, HYDRAULIC: PEDALS AND LINKAGES	Failure Mileage: 150000	Failure Speed

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)	☐ Original Equipment ☐ 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	Fire	Number of Persons Injured	Number of Deaths	Reported to Police
☒ Yes ☐ No	☐ Yes ☒ No			Y

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 1999 HONDA PASSPORT. THE VEHICLE WAS PREVIOUSLY REPAIRED BY AN AUTHORIZED DEALER FOR THE RECALL ASSOCIATED WITH NHTSA CAMPAIGN ID NUMBER: 02I002001 (SERVICE BRAKES, HYDRAULIC:ANTILOCK). THE CONTACT WAS DRIVING IN REVERSE AT A LOW SPEED WHEN SHE APPLIED LIGHT PRESSURE TO THE BRAKE PEDAL AND THE PEDAL DEPRESSED ABNORMALLY INTO THE FLOORBOARD. AS A RESULT, THE CONTACT SIMULTANEOUSLY DEPRESSED THE ACCELERATOR PEDAL AND THE VEHICLE WAS INVOLVED IN A CRASH. A POLICE REPORT WAS FILED BUT NO INJURIES WERE REPORTED. THE VEHICLE WAS NOT TAKEN TO HAVE THE FAILURE DIAGNOSED NOR WAS IT REPAIRED. THE FAILURE RECURRED WITHIN FOUR DAYS AGAIN, RESULTING IN A CRASH. A POLICE REPORT WAS ALSO FILED FOR THE SECOND CRASH BUT NO INJURIES WERE REPORTED. THE VEHICLE WAS NOT TAKEN TO HAVE THE FAILURE DIAGNOSED NOW WAS IT REPAIRED. THE FAILURE AND CURRENT MILEAGE WAS 150,000.

Include, if available: Police/Fire Department Report, Photos, and Repair Invoice. ATTACH ADDITIONAL SHEETS IF NECESSARY