



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
SEP 13 2011
17-AUG-2011

Repository ☐

Reference No.
10419777

OWNER INFORMATION (Type or Print)

Name [REDACTED]
Address [REDACTED]
City **LAWRENCEVILLE** State **GA** Zip Code [REDACTED]

Daytime Telephone Number [REDACTED] E-mail Address
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
1HGCS1B3X8A Make **HONDA** Model **ACCORD LXS** Model Year **2011**
2-DOOR
Date Purchased **12-8-10** Dealer's Name and Telephone Number **MALE OF GA HONDA 678/318-3100** Engine: No: Cylinders **4** Fuel Type: **UNL.**
Original Owner ☐ Dealer's City **BUFFALO** State **GA** Zip Code **30519**
Transmission Type **AUTO** ☒ Antilock Brakes Powertrain Multiple Failure: ☒ Incident Date(s) **15-JUL-2011**
☒ Cruise Control

FAILED COMPONENT(S)/PART(S) INFORMATION

Vehicle Component Code: **030000 SERVICE BRAKES, HYDRAULIC** Failure Mileage **7000** Failure Speed **70**

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: DOTM19ABC036) ☐ 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 2011 HONDA ACCORD COUPE LXS. THE CONTACT STATED WHILE TRAVELING 70MPH THE VEHICLE WOULD NOT STOP UNTIL THE BRAKE PEDAL WAS DEPRESSED TWICE. THE VEHICLE WAS TAKEN TO THE DEALER. THE MANUFACTURER WAS NOT CONTACTED. THE VEHICLE HAD NOT BEEN REPAIRED. THE FAILURE MILEAGE WAS 7,000 AND THE CURRENT MILEAGE WAS 7,200.

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.

Narrative Description of Incident(s), Failure(s), Crash(es), and Injury(ies)

INTERMITTENT BRAKE FAILURE -
PEDAL GOES TO FLOOR - CAR BEING
TRADED BY DEALER TO ANOTHER

ATTACH ADDITIONAL SHEETS IF NECESSARY

U.S. Department
of Transportation

**National Highway
Traffic Safety
Administration**

1200 New Jersey Avenue SE.
Washington, D.C. 20077-9382

Official Business
Penalty for Private Use \$300



**NO POSTAGE
NECESSARY
IF MAILED
IN THE
UNITED STATES**



BUSINESS REPLY MAIL

FIRST-CLASS MAIL

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WASHINGTON, DC

POSTAGE WILL BE PAID BY ADDRESSEE

**US Department of Transportation
National Highway Traffic Safety Administration
Office of Defects Investigation, NVS-210**

1200 New Jersey Avenue SE.
Washington, D.C. 20077-9382



**Think your vehicle
has a safety defect?**



If so:

**Use the enclosed
form to file a report.**

or visit:

www.safercar.gov

or call:

**Vehicle Safety Hotline
888-327-4236**



Vehicle Owner's Questionnaire (VOQ)
U.S. Department of Transportation
National Highway Traffic Safety Administration

