

 <p>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</p>		FOR AGENCY USE ONLY 100148	
		Date Received 01-MAY-2012 JUN 01 2012	Repository <input type="checkbox"/> Reference No. 10457013
OWNER INFORMATION (Type or Print)			
Name		Daytime Telephone Number	E-mail Address
Address		Evening Telephone Number	
City	State	Zip Code	
SOUTH BEND	IN		
<p>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).</p>			
VEHICLE INFORMATION			
17 digit Vehicle Identification Number Located at bottom of windshield on driver's side		Make	Model
5H5RD78894U [REDACTED]		HONDA	CR-V
Model Year		Engine:	Fuel Type:
2004		No: Cylinders	Reg
Date Purchased	Dealer's Name and Telephone Number	State	Zip Code
JAN 2004	BAZNEY MINNEAPOLIS, MN 55427-8504		
Original Owner	Dealer's City		
[Signature]			
Transmission Type	<input checked="" type="checkbox"/> Antilock Brakes	Powertrain	Multiple Failure:
Auto	<input checked="" type="checkbox"/> Cruise Control		Incident Date(s)
			01-MAY-2011
FAILED COMPONENT(S)/PART(S) INFORMATION			
Vehicle Component Code: 120000 EXTERIOR LIGHTING		Failure Mileage	Failure Speed
DRIVERS SIDE HEADLAMP OUTSIDE COVER DISCOLORED		45000	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: DOTM19ABC036)	<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
<p>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).</p>			
<p>TL* THE CONTACT OWNS A 2004 HONDA CR-V. THE CONTACT STATED THAT THE VEHICLE WAS PARKED WHEN HE NOTICED THAT THE HEADLIGHT COVERS WERE VERY CLOUDY AND AFFECTING VISIBILITY. THE VEHICLE WAS NOT TAKEN TO HAVE THE FAILURE DIAGNOSED OR REPAIRED. THE MANUFACTURER WAS NOT MADE AWARE OF THE FAILURE. THE FAILURE MILEAGE WAS 45,000. THE VIN WAS UNAVAILABLE.</p>			
Include, if available: Police/Fire Department Report, Photos, and Repair Invoice.		ATTACH ADDITIONAL SHEETS IF NECESSARY	
<p>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.</p>			