


AUG 14 2014

 <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: 23-JUN-2014 Repository: <input type="checkbox"/> Reference No.: 10605240	
OWNER INFORMATION (Type or Print) Name: [REDACTED] Address: [REDACTED] City: CONWAY State: NH Zip Code: [REDACTED]		Daytime Telephone Number: [REDACTED] Evening Telephone Number: [REDACTED] E-mail Address: NOEMAIL@UNK.GOV	
<p><i>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).</i></p>			
VEHICLE INFORMATION			
17 digit Vehicle Identification Number Located at bottom of windshield on driver's side: 5FNRL5H46EB [REDACTED]		Make: HONDA	Model: ODYSSEY
Date Purchased: 13/18/13	Dealer's Name and Telephone Number: Dover Auto World 800-263-9458		Model Year: 2014
Original Owner: <input type="checkbox"/>	Dealer's City: Dover, NH	State: NH Zip Code: 03820	Engine: No: Cylinders: 6 Fuel Type: Reg
Transmission Type: [] Antilock Brakes [] Cruise Control	Powertrain:	Multiple Failure:	Incident Date(s): 01-FEB-2014
FAILED COMPONENT(S)/PART(S) INFORMATION			
Vehicle Component Code: 100000 POWER TRAIN		Failure Mileage: 4000	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: 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			
<i>(Please describe in detail the incident(s), failure(s), crash(es), and injury(ies).)</i>			
Crash: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Fire: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Number of Persons Injured: 0	Number of Deaths: 0
		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 2014 HONDA ODYSSEY. THE CONTACT STATED THAT WHILE SHIFTING FROM PARK TO REVERSE OR DRIVE, THE VEHICLE INTERMITTENTLY ROLLED WITHOUT THE BRAKE PEDAL BEING DEPRESSED. THE CONTACT HAD TO DEPRESS THE BRAKE PEDAL NUMEROUS TIMES TO PREVENT THE VEHICLE FROM ROLLING. THE VEHICLE WAS NOT REPAIRED AND THE MANUFACTURER WAS NOTIFIED. THE APPROXIMATE FAILURE MILEAGE WAS 4,000. Engine will shut off when in R or D. IF on a hill, car will roll, requiring brake action. First time at 4000- Dealer mechanics say "This is possible", "normal"!!			
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)

IF stop and fail to shift to P, car with allow engine to be shut off - IF shift is in R or D and vehicle on a grade, it rolls & requires braking to stop.

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

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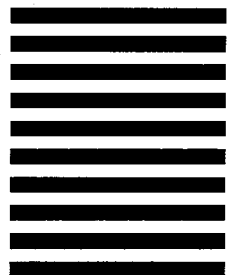


NO POSTAGE NECESSARY IF MAILED IN THE UNITED STATES

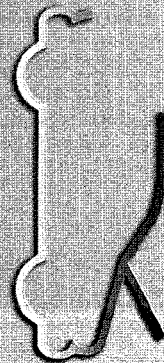
BUSINESS REPLY MAIL FIRST-CLASS MAIL PERMIT NO. 1888 WASHINGTON, DC

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

