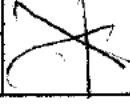


INFORMATION ACT (FOIA), 5 U.S.C. 552(B)(6)  U.S. Department of Transportation National Highway Traffic Safety Administration		DOT Auto Safety Hotline Vehicle Owner's Questionnaire To Report Vehicle Safety Defects 1-888-DASH-2-DOT (1-888-327-4236) INTERNET: www.nhtsa.dot.gov/hotline		FOR AGENCY USE ONLY 100148 Date Received MAR 29 2016 09-JAN-2015		Repository ☐ Reference No. 10671409	
OWNER INFORMATION (Type or Print)							
Name HUSBAND				Daytime Telephone Number		E-mail Address	
Address				Evening Telephone Number			
City SPOKANE		State WA		Zip Code			
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 1HGCM56855A				Make HONDA		Model ACCORD	
Date Purchased 5-7-2005		Dealer's Name and Telephone Number Honda Seattle 206 382 8800				Engine: No: Cylinders 4	
Original Owner ☐		Dealer's City SPOKANE		State WA		Zip Code 99201	
Transmission Type AUTO		☒ Antilock Brakes ☒ Cruise Control		Powertrain		Incident Date(s) 13-MAR-2012	
FAILED COMPONENT(S)/PART(S) INFORMATION							
Vehicle Component Code: 140000 AIR BAGS				ALL STRAPS		Failure Mileage 30000	
Failure Speed (Please describe the failure(s), crash(es), and injury(ies).)							
Crash ☒ Yes ☐ No		Fire ☐ Yes ☒ No		Number of Persons Injured 2		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 2005 HONDA ACCORD. WHILE REVERSING OUT OF A PARKING SPOT, THE VEHICLE IDLED IN DRIVE. THE CONTACT ACCIDENTALLY DEPRESSED THE ACCELERATOR PEDAL AND THE VEHICLE CRASHED INTO A CONCRETE BARRIER. THE AIR BAGS DID NOT DEPLOY. THE CONTACT AND HER HUSBAND SUSTAINED INJURIES THAT REQUIRED MEDICAL ATTENTION. THE VEHICLE WAS TAKEN TO AN INDEPENDENT BODY SHOP WHERE IT WAS REPAIRED. THE MANUFACTURER WAS NOT MADE AWARE OF THE FAILURE. THE FAILURE MILEAGE WAS 30,000.							
Letter on page in back. Space needed larger.							
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.							



U.S. Department
of Transportation
**National Highway
Traffic Safety
Administration**

1200 New Jersey Avenue SE
Washington, DC 20590

Dear Consumer:

NVS-216rr

As a follow-up to your report to the Vehicle Safety Hotline (VSH), we have recorded your information on the enclosed Vehicle Owner's Questionnaire (VOQ) form. Please review the form and make changes, additions and corrections as necessary. Additionally, please provide a more detailed description of the failure(s) you reported that you believe relevant to safety. Also, if available, include copies of repair invoices, letters to the manufacturer, or any other document related to the problem(s) you reported. If a crash or fire occurred, include a copy of the police or fire department report.

It is helpful to be as thorough as possible in your report so that our ability to use your report will be maximized. If you do not have the information, it is not necessary to complete all the boxes. However, it is very difficult to identify the scope of a vehicle problem unless the vehicle identification number (VIN) is known. The VIN is located inside the vehicle on the dashboard adjacent to the left (driver's side) of the windshield pillar and on the drivers' door or the driver's door jam. It may also be listed on a dealer repair invoice or your insurance or registration cards. When reporting a tire problem, the brand name, tire line and complete tire size should be included. Be certain to provide the DOT tire identification number. It is usually located near the rim flange of the tire on either side of the tire.

We do not make your personal information (name, address, phone numbers, etc.) available to the general public. However, if we open an investigation that involves your vehicle, we will provide the manufacturer of your vehicle with a complete copy of your report. The information you provide may assist the manufacturer and NHTSA in determining if a safety-related defect exists.

Any information provided is entirely voluntary. There is no consequence or penalty of any kind if you do not wish to provide it. We seek this information to develop both statistical and investigative evidence that will help identify potential safety related problems in vehicles or vehicle equipment, e.g., tires, child safety seats, jacks, etc.

When completed, please fold and staple or tape the form so that the pre-addressed portion of the form is on the outside. If a larger envelope is used, tape the VOQ form to the larger envelope so that the pre-addressed portion of the form is showing.

If further assistance is needed, please contact the VSH at their toll-free number, 1-888-327-4236.

Thank you for your cooperation.

SORRY FOR THE LENGTH OF THIS
LETTER BUT IT TELLS
HOW WE MUST LIVE
AFTER DISASTER
STRIKES FROM FAULTY PARTS

Sincerely,

Randy Reid

Randy Reid Chief
Correspondence Research Division
Office of Defects Investigation
Enforcement

Enclosure. VOQ



SPORAXE WA

Vehicle Registration Certificate

04/07/2015

License plate	Plate issue date	Tab no	Reg expiration	Value code	Year	Mo reg	Mo gwt	Pwr	Use	Mod yr	Make	Body
	05/2012		05/07/2016	24500	2005	12		G	PAS	2005	HONDA	ACD4D
Vehicle ident (VIN)/Serial no	Res co	Scale wt	Seats	Model	BT	Gwt	Gwt st	Gwt exp	Fleet	Equip		
1HGCM56855A	32	3041										
Prev plate	Filing	TBD 3210	RTA Tax	Service fee	Gwt/Veh wt	Other	Total fees	Gwt cr				
	\$3.00	\$20.00		\$5.00	\$10.00	\$30.75	\$68.75					

THIS DOCUMENT WILL GIVE YOU

ALL THE INFORMATION
YOU NEED ABOUT THE
COMPONENT PARTS

DISPLAY TAB ON BACK LICENSE PLATE ONLY - FRONT PLATE IS STILL REQUIRED

Signature of registered owner(s)

X
Signature

Comments:

COLOR-RED

Validation code 03320108150970407150033083993

RPT ID: ASHFPR-1

This certificate is not proof of ownership.

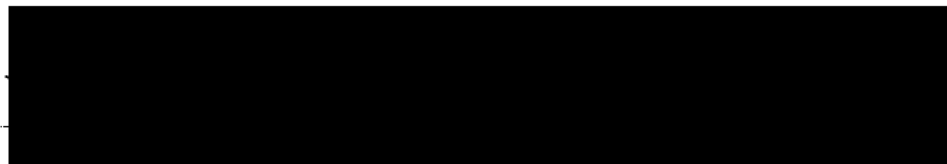
VehicleRegistration (R/8/14)E

B. ①

TUESDAY 3-8-16

THIS LETTER IS WRITTEN

BY



HUSBAND AND THE DRIVER

OF THE 2005 HONDA INVOLVED HERE

THE SAFETY CONTROL SYSTEM

FAILED CAUSING TREMENDOUS

PHYSICAL DAMAGE TO THE

OCCUPANTS AND MATERIAL

DAMAGE TO THE HONDA EX

IMPORTANT FACTS

TO REMEMBER

pg 2

WHEN MY WIFE AND I TRAVEL
IN A VEHICLE WE ALWAYS
TAKE ADVANTAGE OF ALL
THE SAFETY EQUIPMENT
THAT IS AVAILABLE

Q WE DID NOT CARRY
MEDICAL COVERAGE ON
OUR 2005 HONDA

WE BOTH CARRY MEDICARE
AND MSC SUPPLEMENTAL
THIS COVERED REHAB ALSO

PB3

ALL STATE CARRIED
COVERAGE ON THE CAR

HOW THE ACCIDENT HAPPENED

MY WIFE AND I DROVE TO
HER DOCTOR'S OFFICE IN
A MEDICAL BUILDING.

THE PARKING GARAGE WAS
BUILT IN A CIRCULAR SHAPE

WE ENTERED FROM THE
STREET ON THE 2ND LEVEL

PC④

THE 2ND AND 3RD LEVEL
WERE FULL BUT THE 4TH
HAD A CLOSE OPERATOR
IT WAS CLOSE QUARTERS.

A HUBER SUV HAD BACKED
IN A VIOLATION OF THE
PARADE. I SLOWLY DROVE
IN ABOUT 1/2 WAY IN. THE HUBER
SUV WAS ALMOST ON MY LINE

I WANTED TO LEAVE THE
SUV ROOM TO OPEN HIS DOOR

I COULD NOT FULLY OPEN MY DOOR

PB(5)

I DECIDED TO OPEN IT
UP A LITTLE AND LEAN OUT
FAR ENOUGH TO SEE THE LANE
WHEN I LEANED OUT MY
FULL SMOOTH LEATHER SOLED
SHOE SLIPPED OFF THE BRAKE
AND WE WENT CRASHING DOWN ON
THE GAS PEDAL TOWARD US
AHEAD INTO A CONCRETE STOP
NO RESTRAINTS WORKED AND
WE WERE AT THE MERCY OF
THE ELEMENTS
I THOUGHT IT WAS THE WORST END
WHEN I GOT OUT FROM UNDER
THE DASH I SHOT THE CAR OFF

pg 6

I CALLED TO MY WIFE AND
TOLD HER TO GET OUT OF THE
CAR. SHE SAID I MUST GET
MY POSE, HER GLASSES
WERE IN THE BACK SEAT
I TOLD MY WIFE TO HOBBLE
OVER TO THE MEDICAL BLDG
ENTRANCE. I SAID I WOULD
GO AHEAD AND GET SOME HELP
GOING UP TO THE DOORWAY
I THOUGHT I WAS GOING TO DIE
I BECKONED TO A TRAFFIC
DIRECTOR TO COME TO ME
HE CAME OUT AND I SAID
"MY WIFE AND I ARE HURT BAD"

GO GET 2 WHEELCHAIRS
WITH 2 PEOPLE TO PUSH US
UP TO THE EMERGENCY ROOM
HE SAID "YES SIR" AND
DID AS I ASKED HIM TO DO
WE WERE BOTH EXAMINED
IN THE EMERGENCY ROOM
AND AFTERWARDS WERE SENT
TO OUR DIFFERENT FLOOR AND ROOMS
I WAS ON THE 4TH FLOOR AND
MY WIFE WAS ON THE 2ND FLOOR
I WAS HURT BADLY AND WAS
MOSTLY OUT OF IT.



WAS HEAVILY
BRUISED FROM THE STRAPS

AND FROM HAVING HER
LEGS DRIVEN DOWN UNDER
THE DASH - SHE WAS KEPT
2 DAYS FOR OBSERVATION -
THEN SENT HOME
I WAS KEPT 4 DAYS WITH
PAIN MEDICINE X RAYS
FOR FRACTURED STERNUM
AND FRACTURE VERTIBRA
IN THE BACK AND HEAVY
LEG BRUISE FROM THE LOW DASH
AFTER 4 DAYS I WAS
SENT TO CHECK MARK REHAB
CENTER FOR 3 WEEKS
I WAS GIVEN PAIN MEDICINE

LUNG BREATHING MEDICINE
AND VARIOUS REHAB EXERCISE
TO HELP HEAL MY BROKEN
STERNUM AND SPINE.

A FRACTURED STERNUM
TAKES 1 YEAR TO HEAL AND
SEVERELY LIMITS YOUR ACTIVITIES

5 POUND WEIGHT LIFTING.

BECAUSE OF THE

PHYSICAL DAMAGE TO US

WE NEVER AGAIN GET TO

DRIVE OUR BEAUTIFUL RED

2005 HONDA ACCORD

BECAUSE OUR YOUNG DAUGHTER

76 (8)

HAS LEB PROBLEMS SHE
NEEDS AUTOMATIC TRANSMISSION
SUCH AS OUR.

WE SOLD IT TO HER AS A
VERY REASONABLE PRICE
\$800 ~~000~~

WE PAID \$26400 FOR OUR
HONDA AND GOT TOTAL \$
BUT TROUBLE.

WE CANNOT DRIVE OUR 30000
MILE HONDA BUT MUST

DEPEND ON OTHERS TO DRIVE
US TO DOCTOR. WE NEED GROCERIES
ETC.

WE HAVE LOST OUR INDEPENDENCE