

FOR AGENCY USE ONLY 100148	
Date Received 06-MAY-2020	Repository <input type="checkbox"/> Reference No. 11323507
Daytime Telephone Number [REDACTED]	E-mail Address [REDACTED]
Evening Telephone Number	

**Vehicle Owner's Questionnaire**  
**To Report Vehicle Safety Defects**  
**1-888-DASH-2-DOT**  
**(1-888-327-4236)**  
**INTERNET:www.nhtsa.dot.gov/hotline**

**OWNER INFORMATION (Type or Print)**

Name [REDACTED]  
 Address [REDACTED]  
 City STATEN ISLAND 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: 5J6RM4H39CL [REDACTED]  
 Make HONDA Model CR-V Model Year 2012

Date Purchased MARCH 2012 Dealer's Name and Telephone Number BAY RIDGE HONDA  
 Engine: No: Cylinders 4 Fuel Type: GAS

Original Owner  Dealer's City BROOKLIN, NY 11209 State NY Zip Code 11209

Transmission Type Auto  Antilock Brakes  Cruise Control Powertrain Multiple Failure: SPIN BELOW Incident Date(s) 02-MAY-2020

**FAILED COMPONENT(S)/PART(S) INFORMATION**

Vehicle Component Codes: 030000 BRAKES (PWS), 200000 WHEELS Failure Mileage 59000 Failure Speed 50

**ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A TIRE FAILURE**

Tire Make [REDACTED] Tire Model (Name or Number) [REDACTED] Tire Size (Example P215/65R15) [REDACTED]

DOT No. (Example: DOTM19ABC036)  Original Equipment  Prior Repair Failure Location: [REDACTED]

Tire Component Code [REDACTED] Tire Failure Type: [REDACTED]

**ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A CHILD SEAT FAILURE**

Make: [REDACTED] Date Manufactured: [REDACTED] Model No./Name: [REDACTED]

Seat Type: [REDACTED] Installation System: [REDACTED]

Child Seat Component Code: [REDACTED] Failed Part: [REDACTED]

**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 [REDACTED] Number of Deaths [REDACTED] 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 2012 HONDA CR-V. THE CONTACT STATED THAT WHILE DRIVING AT 50 MPH, THERE WAS AN ABNORMAL NOISE EMITTING FROM THE REAR OF THE VEHICLE. THE VEHICLE WAS TAKEN TO AN INDEPENDENT MECHANIC TO BE DIAGNOSED. THE CONTACT WAS INFORMED THAT THE REAR BRAKE CALIPERS NEEDED TO BE REPLACED. THE CONTACT STATED THAT THE BRAKE CALIPERS, ROTORS, BRAKE PADS, AND HYDRAULIC BRAKE HOSES WERE REPLACED. NEITHER THE DEALER NOR THE MANUFACTURER WERE NOTIFIED OF THE FAILURE. THE FAILURE MILEAGE WAS APPROXIMATELY 59,000.

*NO LIGHT INDICATOR LIT UP TO SHOW BRAKE MALFUNCTION*

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 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.