Form Approved: O.M.B. No. 2127-0039

DOT Auto Safety Hotline

Vehicle Owner's Questionnaire (VOQ)

U.S. Department of Transportation

National Highway Traffic Safety Administration

NATIONWIDE 1-888-DASH-2-DOT
1-888-327-4236
www.nhtsa.dot.gov/hotline

FOR AGENCY USE ONLY 258

Date Received: 30-SEP-2000

Od_or ____ ____
rt_dt ____ ____
od_rt ____ ____
up_ltr ____ ____

Reference No.: 732995

[redacted]

Do you authorize NHTSA to provide a copy of report to the manufacturer of your vehicle? ☐ *YES* ☐ *NO*
In the absence of an authorization, NHTSA WILL NOT provide your name and address to the vehicle manufacturer.

Signature of Owner _____ Date____/____/____

VEHICLE INFORMATION

Vehicle Ident. No. (VIN.) (located at bottom of windshield on driver's side)	Vehicle Make	Vehicle Model	Vehicle Year	Current Odometer Reading
4S6DM58W4Y4414000	HONDA TRUCK	PASSPORT	2000	

Purchase Date: 01-AUG-2000
☒ New ☐ Used

Dealer's Name_____
City_____ State_____ Zip Code_____

Engine Size (CID/CC/L) 3.0
No Cylinders _____

☐ Turbo ☐ Diesel ☐ Gas ☐ Fuel Injection

Transmission Type	Antilock Brakes	Restraint System	Cruise Control	Drive Train	Vehicle Type	Body Style
☐ Manual ☐ Automatic	☐ Yes ☒ No	☐ 3-Point Belt ☒ Driverside Airbag ☐ Passengerside Airbag ☐ Motorbelt ☐ 2-Point Belt	☒ Yes ☐ No	☐ Front ☐ Rear ☒ 4-Wheel	☐ Car ☐ Van ☐ Minivan ☐ Other_____ ☐ Sport Utl ☐ Truck ☐ Motorcycle	☐ 2-Door ☐ 4-Door ☐ Stationwagon ☐ Pick Up Truck ☒ Other_____

FAILED COMPONENT(S)/PART(S) INFORMATION

Component	Par. Name(s)	Location	Failed Part(s)
02100000	SUSPENSION:INDEPENDENT FRONT	☐ Left ☐ Right ☐ Front ☐ Rear	☐ Original ☐ Replacement

No of Failures	Date(s) of Failure(s) / Mileage at Failure(s) / Vehicle Speed at Failure(s)	Failed Part(s) Available?	NHTSA Previously Contacted?
1	16-SEP-2000 / 1100 / 0	☐ Yes ☐ No	☐ Yes ☐ No

APPLICATION INCIDENT INFORMATION

(Please describe in detail the incident(s), Failure(s), Crash(es), and injury(ies) on the back of this form)

Crash	Fire	Number of Persons Injured	Number of Fatalities	Estimated Property Damage	Reported to Police
☐ Yes ☐ No	☐ Yes ☒ No	0	0		☐ Yes ☒ No

NARRATIVE DESCRIPTION OF FAILURE(S), INCIDENT(S), INJURY(IES)

THIS VEHICLE IS OUT OF ALIGNMENT IT HAD THE TIRES ROTATED AFTER 5 DAYS AND THEY ARE AGAIN CUPPED.THEY TRIED TO FIX THE ALIGNMENT BUT I WAS TOLD THAT THEY COULD NOT FIX IT WITHOUT A CHAMFER SHIM KIT WHCIH IS NOT ACCEPTABLE TO ME. THIS MEANS THERE IS FRONT END DAMAGE PER THE MECHANICS I SPOKE WITH. THE HOOD HAD SPOTS WHICH WERE TO BE BUFFED OUT BUT THE DEALER COULD NOT BUFF THEM OUT AND PAINTED IT INSTEAD WITHOUT MY APPROVAL. I NOW DO NOT HAVE A FACTORY PAINT JOB. THE 2 MIRRORS HAD SPOTS WHICH MEANT THAT THE MIRRORS NEADED TO BE REPLACED. ALSO THE DOOR STRIPS AND THE INTERIOR DOOR PIECES HAD TO ALSO BE REPLACED. THE LAST STRAW WAS THE TRUCK LEASKS AT THE BACK WHEN IT WAS WASHED BY ME. I HAVE NO FAITH IN THE VEHICLE OR THE DEALER TO RESOLVE THESE PROBLEMS. *AK

CONTINUED ON BACK IF NEEDED