



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

Auto Safety Hotline

Vehicle Owner's Questionnaire

**NATIONWIDE 1-800-424-9393
DC METRO AREA (202) 366-0123
INTERNET: <http://www.nhtsa.dot.gov>**

FOR AGENCY USE ONLY 1038

Date Received

14-JAN-2002

Od_or _____
rt_dt _____
pd_rt _____
rp_lr _____

Reference No.

8002117

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) <small>(Locate at bottom of and/or above driver's side)</small>	Vehicle Make	Vehicle Model	Vehicle Year	Current Odometer Reading		
1HGCD5659BA007761	HONDA	ACCORD	1997			
Purchase Date <input type="checkbox"/> New <input checked="" type="checkbox"/> Used	Dealer's Name City _____ State _____ Zip Code _____	Engine Size (CID/CC/L) _____ No Cylinders _____	<input type="checkbox"/> Turbo <input type="checkbox"/> Diesel <input type="checkbox"/> Gas <input type="checkbox"/> Fuel Injectio			
Transmission Type <input type="checkbox"/> Manual <input type="checkbox"/> Automatic	Antilock Brakes <input type="checkbox"/> Yes <input type="checkbox"/> No	Restraint System <input type="checkbox"/> 3-Point Belt <input type="checkbox"/> Driverside Airbag <input type="checkbox"/> Passengerside Airbag <input checked="" type="checkbox"/> Motorbelt <input type="checkbox"/> 2-Point Bel	Cruise Control <input type="checkbox"/> Yes <input type="checkbox"/> No	Drive Train <input type="checkbox"/> Front <input type="checkbox"/> Rear <input type="checkbox"/> 4-Wheel	Vehicle Type <input type="checkbox"/> Car <input type="checkbox"/> Van <input type="checkbox"/> Minivan <input type="checkbox"/> Other _____ <input type="checkbox"/> Sport Util <input type="checkbox"/> Truck <input type="checkbox"/> Motorcycle	Body Style <input type="checkbox"/> 2-Door <input type="checkbox"/> 4-Door <input type="checkbox"/> Stationwagon <input type="checkbox"/> Pick Up Truck <input type="checkbox"/> Other _____

FAILED COMPONENT(S)/PART(S) INFORMATION

Component 12130000	Part Name(s) INTERIOR SYSTEMS:PASSIVE RESTRAINT:BELTS	Location <input type="checkbox"/> Left <input type="checkbox"/> Right <input type="checkbox"/> Front <input type="checkbox"/> Rear	Failed Part's <input type="checkbox"/> Original <input type="checkbox"/> Replacement
No of Failure	Dates of Failure(s) 01-JAN-2002 Mileage at Failure(s) 90 Vehicle Speed at Failure(s) _____	Failed Part(s) <input type="checkbox"/> Yes <input type="checkbox"/> No	NHTSA Previously <input type="checkbox"/> Yes <input type="checkbox"/> 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 <input type="checkbox"/> Yes <input type="checkbox"/> No	Fire <input type="checkbox"/> Yes <input type="checkbox"/> No	Number of Persons Injured	Number of Fatalities	Estimated Property Damag	Reported to Polic <input type="checkbox"/> Yes <input type="checkbox"/> No
---	--	---------------------------	----------------------	--------------------------	---

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

FRONT AND REAR SHOULDER BELTS FAIL TO PROPERLY RETRACT, CAUSING INADEQUATE PROTECTION WHEN BELTS ARE NEEDED. CONSUMER HAS YET TO CONTACT DEALER. PLEASE PROVIDE ANY FURTHER DETAILS.*AK

GOVERNMENT USE ONLY

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.

DOT Auto Safety Hotline
 1-888-327-4236
 www.nhtsa.dot.gov/home

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

Vehicle Owner's Questionnaire (VOQ)
 NATIONAL 1-888-DASH-2-DOT
 1-888-327-4236
 www.nhtsa.dot.gov/home

DEFECTS INVESTIGATION

Date Received: 11 JAN 2002
 10:05 PM EST

Reference No.: 8002117

VOQ Number: 733585

Front Number: [Redacted]

Do you authorize NHTSA to provide a copy of report to the manufacturer of your vehicle? YES NO

In the absence of an authorized signature, NHTSA will NOT provide your name and address to the vehicle manufacturer.

Signature of Owner: [Redacted]

VEHICLE INFORMATION

Vehicle Identification Number (VIN): 1HGCD5659BA007761
 Vehicle Make: HONDA
 Vehicle Model: ACCORD
 Vehicle Year: 1997
 Current Odometer Reading: [Redacted]

VEHICLE INFORMATION

Dealers Name: Fred Brown
 City: Bryan, State: TX, Zip Code: 77808
 Purchase Date: [Redacted]

New Used

Engine Size: [Redacted] No. Cylinders: [Redacted]
 Fuel Injection: Turbo Diesel Gas

Transmission Type: Automatic Manual
 Restraint System: 3-Point Belt 2-Point Belt Passenger Side Airbag

Vehicle Type: Car Van Minivan Other
 Drive Type: Front Rear 4-Wheel

Body Style: 2-Door 4-Door Station Wagon Pick Up Truck

FAILED COMPONENT(S)/PART(S) INFORMATION

Component: 12130000
 Part Name(s): INTERIOR SYSTEMS, PASSIVE RESTRAINT BELTS

Location: Left Right Both

Failed Parts: Original Replacement

Date(s) of Failure(s): 01 JAN 2002
 Mileage at Failure(s): 20
 Vehicle Speed at Failure(s): [Redacted]

No of Failures: [Redacted]

Crash: Yes No
 Fire: Yes No
 Number of Persons Injured: [Redacted]
 Number of Fatalities: [Redacted]
 Estimated Property Damage: [Redacted]
 Reported to Police: Yes No

APPLICATION INCIDENT INFORMATION

(Please describe in detail the incident(s), failure(s), crash(es), and injury(s) on the back of this form.)

NHTSA Previously Reported to Police: Yes No

FRONT AND REAR SHOULDER BELTS FAIL TO PROPERLY RETRACT, CAUSING INADEQUATE PROTECTION WHEN BELTS ARE NEEDED. CONSUMER HAS YET TO CONTACT DEALER. PLEASE PROVIDE ANY FURTHER DETAILS. *AK

Back seat belts will not pull out and in seat unusable.
 Great driver, belt will not retract properly! The Honda Mechanic said if I cleaned it, it would work correctly. I haven't taken my car back to them.

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

The Privacy Act of 1974 (Public Law 93-502) 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.

CONTINUE ON BACK IF NEEDED