



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 336

Date Received

05-FEB-2002

Od_or _____
rt_dt _____
pd_rt _____
rp_lr _____

Reference No.

8003577

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) (Location at bottom of windshield and driver's side door)	Vehicle Make	Vehicle Model	Vehicle Year	Current Odometer Reading
NOT AVAILABLE	HONDA	ACCORD	1997	
Purchase Date ☐ New ☒ Used	Dealer's Name _____ City _____ State _____ Zip Code _____		Engine Size (CID/CC/L) _____ No Cylinders _____	☐ Turbo ☐ Diesel ☐ Gas ☐ Fuel Injection
Transmission Type ☐ Manual ☐ Automatic	Antilock Brakes ☐ Yes ☐ No	Restraint System ☐ 3-Point Belt ☐ Motorbelt ☐ Driverside Airbag ☐ 2-Point Bel ☐ Passengerside Airbag	Cruise Control ☐ Yes ☐ No	Drive Train ☐ Front ☐ Rear ☐ 4-Wheel
Vehicle Type ☐ Car ☐ Sport Util ☐ Van ☐ Truck ☐ Minivan ☐ Motorcycle ☐ Other _____		Body Style ☐ 2-Door ☐ 4-Door ☐ Stationwagon ☐ Pick Up Truck ☐ Other _____		

FAILED COMPONENT(S)/PART(S) INFORMATION

Component 05100000	Part Name(s) ENGINE	Location ☐ Left ☐ Right ☐ Front ☐ Rear	Failed Part(s) ☐ Original ☐ Replacement
No of Failure	Dates of Failure(s) 05-JAN-2002 Mileage at Failure(s) 37000 Vehicle Speed at Failure(s) _____	Failed Part(s) ☐ Yes ☐ No	NHTSA Previously ☐ 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 ☐ Yes ☐ No	Fire ☐ Yes ☐ No	Number of Persons Injured	Number of Fatalities	Estimated Property Damag	Reported to Police ☐ Yes ☐ No
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NARRATIVE DESCRIPTION OF FAILURE(S), INCIDENT(S), INJURY(IES)

WHILE BACKING OUT OF DRIVEWAY CONSUMER SAW BLACK SMOKE COMING FROM UNDER THE HOOD. CONSUMER STOPPED VEHICLE, LOOKED UNDERNEATH THE CAR, AND SAW THAT OIL WAS POURING ONTO THE GROUND. DEALER HAS NOT BEEN CONTACTED. *AK

CONTINUE ON REVERSE

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		Vehicle Owner's Questionnaire (VOQ) DOT Auto Safety Hotline 1-888-DASH-2-DOT 1-888-327-4236 www.nhtsa.dot.gov/hotline		DEFECTS INVESTIGATION OFFICE 05-FEB-2002 Reference No. 8003577	
OWNER INFORMATION (Type or Print) 737529 Home Work		Do you authorize NHTSA to provide a copy of report to the manufacturer of your vehicle? ☒ YES ☐ NO In the absence of your signature, provide your name and address to the vehicle manufacturer.			
Signature of _____ Date 3/18/02		VEHICLE INFORMATION Vehicle Ident. No. (VIN) HG ED 5634 VA 028967 Vehicle Make HONDA Vehicle Model ACCORD LX Vehicle Year 1997 Current Odometer Reading 37,000 Engine Size (CID/CC/L) _____ Fuel Injection _____ Turbo _____ Diesel _____ Gas _____			
Transmission Type ☒ Automatic ☐ Manual		Restraint System ☒ 3-Point Belt ☐ 2-Point Belt ☐ Driver's Side Airbag ☒ Passenger's Side Airbag			
Drive Train ☒ Front ☐ Rear ☐ 4-Wheel		Vehicle Type ☒ Car ☐ Minivan ☐ Other ☐ Truck ☐ Motorcycle ☐ Station Wagon ☐ Pick Up ☐ Truck			
Body Style ☒ 2-Door ☐ 4-Door ☐ Station Wagon ☐ Pick Up ☐ Truck		Failed Component(s)/Part(s) Information Component 05100000 Part Name(s) Balance Shaft, Timing Belt, Balance Shaft Retainer and Balance Shaft Seal/ front main. Location Front Failed Parts Original Replacement NHTSA Previously 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)		Narrative Description of Failure(s), Incident(s), Injury(ies) WHILE BACKING OUT OF DRIVEWAY CONSUMER SAW BLACK SMOKE COMING FROM UNDER THE HOOD. CONSUMER STOPPED VEHICLE, LOOKED UNDERNEATH THE CAR, AND SAW THAT OIL WAS POURING ONTO THE GROUND. DEALER HAS NOT BEEN CONTACTED. *AK			
Crash ☐ Yes ☐ No Fire ☐ Yes ☐ No Number of Persons Injured _____ Number of Fatalities _____ Estimated Property Damage _____ Reported to Police ☐ Yes ☐ No		CONTINUE ON BACK IF NEEDED			

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**THE FOLLOWING PAGES ARE WITHHELD TO
PROTECT UNWARRANTED INVASION OF
PERSONAL PRIVACY PURSUANT TO
EXEMPTION 6 OF THE FREEDOM OF
INFORMATION ACT (FOIA), 5 U.S.C. 552(b)(6)**

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