

 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 335 Date Received <u>10-12-2002</u> 30-OCT-2002 Office <u>INVESTIGATION</u> Reference No. <u>8021929</u> Work Number _____ Home Number _____	
OWNER INFORMATION (Type or Print) [Redacted] PORTSMOUTH VA		DEFECTS INVESTIGATION	
Do you authorize NHTSA to provide a copy of report to the manufacturer of your vehicle? In the absence of an express to the vehicle manufacturer, _____ Signature of Owner _____ Date <u>12/15/2002</u>			
VEHICLE INFORMATION			
Vehicle Ident. No. (vini) (Located at bottom of windshield on driver's side)	Vehicle Mkt	Vehicle Model	Vehicle Year
NOT AVAILABLE	ACURA	TL	2002
Purchase Date <u>June 2001</u>	Dealer's Name <u>HALL ACURA</u>		Current Odometer Reading <u>31,000</u>
☒ New ☒ Used	City <u>Virginia Beach</u> State <u>VA</u> Zip Code _____		Engine Size (CID/CC) <u>V6</u> No Cylinders <u>6</u> ☐ Turbo ☐ Diesel ☒ Gas ☒ Fuel Injecto
Transmission Type ☐ Manual ☒ Automatic	Antilock Brakes ☒ Yes ☐ No	Restraint System ☒ 4-Point Belt ☐ Motorbelt ☒ Driverside Airbag ☐ 2-Point Belt ☒ Passengerside Airbag	Cruise Control ☒ Yes ☐ No Drive Train ☐ Front ☐ Rear ☐ 4-Wheel
Vehicle Type ☒ Car ☐ Van ☐ Minivan ☐ Other		Body Style ☒ 2-Door ☐ 4-Door ☐ Stationwagon ☐ Pick Up Truck ☐ Other	
FAILED COMPONENT(S)/PART(S) INFORMATION			
Component <u>08420000</u>	Part Name(s) <u>FUEL THROTTLE LINKAGES ACCELERATOR RIGID</u>	Location ☐ Left Front ☐ Right Rear	Failed Part(s) ☒ Original ☐ Replacement
No of Failures <u>one</u>	Date(s) of Failure(s) <u>29-OCT-2002</u> Mileage at Failure(s) <u>31000</u> Vehicle Speed at Failure(s) <u>20 mph</u>	Failed Part(s) Available? ☐ 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 <u>None</u>	Number of Fatalities <u>None</u> Estimated Property Damage <u>None</u>
Reported to Police ☐ Yes ☒ No			
NARRATIVE DESCRIPTION OF FAILURE(S), INCIDENT(S), INJURY(IES)			
WHILE SITTING IN VEHICLE WITH ENGINE RUNNING, THE ENGINE LIGHT ILLUMINATED, GEAR LIGHTS STARTED TO FLASH, VEHICLE WAS MAKING A HIGH GRINDING SOUND. VEHICLE ALSO WAS NOT ACCELERATING. TOOK TO DEALER AND THEY REPLACED THE TRANSMISSION. PLEASE PROVIDE ANY FURTHER INFORMATION. TS			

CONTINUE ON BACK IF NEEDED

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.