

 <b>DOT Auto Safety Hotline</b> <b>Vehicle Owner's Questionnaire (VOQ)</b> U.S. Department of Transportation <b>National Highway Traffic Safety Administration</b> <b>NATIONWIDE 1-888-DASH-2-DOT</b> <b>1-888-327-4236</b> <b>www.nhtsa.dot.gov/hotline</b>		<b>FOR AGENCY USE ONLY</b> 241 <b>Date Received</b> <b>13-AUG-2000</b> <b>Od_or</b> _____ <b>ri_dt</b> _____ <b>od_rt</b> _____ <b>up_ltr</b> _____ <b>Reference No.</b> <b>867634</b>	
<b>OWNER INFORMATION (Type or Print)</b> [Redacted]		<b>Work Number</b> [Redacted] <b>Home Number</b> _____	
Do you authorize NHTSA to provide a copy of report to the manufacturer of your vehicle? <input type="checkbox"/> YES <input type="checkbox"/> NO In the absence of an authorization, NHTSA WILL NOT provide your name and address to the vehicle manufacturer.			
<b>Signature of Owner</b> _____		<b>Date</b> ____/____/____	
VEHICLE INFORMATION			
<b>Vehicle Ident. No. (VIN)</b> (Located at bottom of windshield or driver's side) <b>PLEASE FILL IN</b>		<b>Vehicle Make</b> HONDA TRUCK <b>Veh. de. Mode</b> CRV <b>Vehicle Year</b> 1997 <b>Current Odometer Reading</b> _____	
<b>Purchase Date</b> <input checked="" type="checkbox"/> New <input type="checkbox"/> Used		<b>Dealer's Name</b> _____ <b>City</b> _____ <b>State</b> _____ <b>Zip Code</b> _____ <b>Engine Size (CID/CC/L)</b> _____ <input type="checkbox"/> Turbo <b>No. Cylinders</b> _____ <input type="checkbox"/> Diesel <input type="checkbox"/> Gas <input type="checkbox"/> Fuel Injecto	
<b>Transmission Type</b> <input type="checkbox"/> Manual <input type="checkbox"/> Automatic		<b>Antilock Brakes</b> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
<b>Restraint System</b> <input checked="" type="checkbox"/> 3-Point Belt <input type="checkbox"/> Motorbelt <input type="checkbox"/> Driverside Airbag <input type="checkbox"/> 2-Point Bel <input type="checkbox"/> Passengerside Airbag		<b>Cruise Control</b> <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
<b>Drive Tra</b> <input type="checkbox"/> Front <input type="checkbox"/> Rear <input type="checkbox"/> 4-Wheel		<b>Vehicle Type</b> <input type="checkbox"/> Car <input type="checkbox"/> Sport Ut <input type="checkbox"/> Van <input type="checkbox"/> Truck <input type="checkbox"/> Minivan <input type="checkbox"/> Motorcycle <input type="checkbox"/> Other _____	
		<b>Body Style</b> <input type="checkbox"/> 2-Door <input type="checkbox"/> 4-Door <input type="checkbox"/> Stationwagon <input type="checkbox"/> Pick Up <input type="checkbox"/> Truck	
FAILED COMPONENT(S)/PART(S) INFORMATION			
<b>Component</b> 08510000		<b>Part Name(s)</b> ELECTRICAL SYSTEM:IGNITION:SWITCH	
		<b>Location</b> <input type="checkbox"/> Left <input type="checkbox"/> Right <input type="checkbox"/> Front <input type="checkbox"/> Rear	
		<b>Failed Part(s)</b> <input type="checkbox"/> Original <input type="checkbox"/> Replacement	
<b>No. of Failures</b> _____		<b>Date(s) of Failure(s)</b> 03-AUG-2000 <b>Mileage at Failure(s)</b> 68000 <b>Vehicle Speed at Failure(s)</b> _____	
		<b>Failed Part(s)</b> <input type="checkbox"/> Yes <input type="checkbox"/> No	
		<b>NHTSA Previously</b> <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)			
<b>Crash</b> <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		<b>Fire</b> <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
<b>Number of Persons Injured</b> _____		<b>Number of Fatalities</b> _____	
<b>Estimated Property Damage</b> _____		<b>Reported to Polic</b> <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
NARRATIVE DESCRIPTION OF FAILURE(S), INCIDENT(S), INJURY(IES)			
<b>MELTED METAL FALLING FROM UNDER INSTRUMENT PANEL ONTO DRIVER'S FOOT. DEALER NOTIFIED, AND INFORMED CONSUMER THAT THE PROBLEM WAS DUE TO IGNITION SWITCH HAVING MELTED. FEEL FREE TO PROVIDE ANY FURTHER DETAILS. *AK</b>			
CONTINUE ON BACK IF NEEDED			
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.			