

U.S. Department  
of TransportationNational Highway  
Traffic Safety  
Administration

DOT Auto Safety Hotline

**Vehicle Owner's Questionnaire (VOQ)**

NATIONWIDE 1-888-DASH-2-DOT

1-888-327-4236

www.nhtsa.dot.gov/hotline

FOR AGENCY USE ONLY

436

Date Received

22-SEP-2000

Od\_or \_\_\_\_\_  
rt\_dt \_\_\_\_\_  
od\_rt \_\_\_\_\_  
up\_ltr \_\_\_\_\_

Reference No.

871253

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>(located at bottom of windshield or driver's side)</small>	Vehicle Make	Vehicle Model	Vehicle Year	Current Odometer Reading
1HGCE1824VA008387	HONDA	ACCORD	1997	

Purchase Date	Dealer's Name _____	Engine Size (CID/CCL) _____	<input type="checkbox"/> Turbo <input type="checkbox"/> Diesel <input type="checkbox"/> Gas <input type="checkbox"/> Fuel Injection
<input type="checkbox"/> New <input checked="" type="checkbox"/> Used	City _____ State _____ Zip Code _____	No. Cylinders _____	

Transmission Type	Antilock Brakes	Restraint System	Cruise Control	Drive Train	Vehicle Type	Body Style
<input type="checkbox"/> Manual <input type="checkbox"/> Automatic	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> 3-Point Belt <input type="checkbox"/> Driver Side Airbag <input type="checkbox"/> Passenger Side Airbag <input type="checkbox"/> Inflator Bell <input type="checkbox"/> 2-Point Belt	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Front <input type="checkbox"/> Rear <input type="checkbox"/> 4-Wheel	<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 <input type="checkbox"/> 2-Door <input type="checkbox"/> 4-Door <input type="checkbox"/> Station Wagon <input type="checkbox"/> Pick Up Truck <input type="checkbox"/> Other

## FAILED COMPONENT(S)/PART(S) INFORMATION

Component 12120000	Part Name(s) INTERIOR SYSTEMS; PASSIVE RESTRAINT; OTHER PARTS	Location <input type="checkbox"/> Left <input type="checkbox"/> Front <input type="checkbox"/> Right <input type="checkbox"/> Rear	Failed Part(s) <input type="checkbox"/> Original <input type="checkbox"/> Replacement
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No. of Failures	Date(s) of Failure(s) 22-SEP-2000 Mileage at Failure(s) _____ Vehicle Speed at Failure(s) _____	Failed Part(s) Available?   Yes   No	NHTSA Previously Contacted?   Yes   No
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## 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 checked="" type="checkbox"/> No	Fire <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Number of Persons Injured	Number of Fatalities	Estimated Property Damage	Reported to Police <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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## NARRATIVE DESCRIPTION OF FAILURE(S), INCIDENT(S), INJURY(IES)

THE SRS INDICATOR LIGHT KEEPS COMING ON IN THE VEHICLE. THE DEALER SAYS IT'S FAULTY DEFECTIVE PIECE. THE AIRBAGS NEEDS TO BE REPLACED & THE MANUFACTURE FEELS THEY'RE NOT RESPONSIBLE FOR REPAIR.

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.



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Date Received

22 SEP 2000

22 SEP 2000

DEFECTS INVESTIGATION

Ord. or ref. dt. or up. dt.

Reference No.

871253

OWNER INFORMATION (Type or Print)

541304

Work Number

Home

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 10/26/00

VEHICLE INFORMATION

Vehicle Ident. No. (VIN) (Located at bottom of windshield on driver's side) <b>1HGCE1824VA008387</b>	Vehicle Make <b>HONDA</b>	Vehicle Model <b>ACCORD</b>	Vehicle Year <b>1997</b>	Current Odometer Reading <b>60,400</b>
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Purchase Date <b>May 1997</b>	Dealer's Name <b>Honda of Grand Blanc, MI</b>	Engine Size (CID/CC) <b>2.1L</b>	<input type="checkbox"/> Turbo <input type="checkbox"/> Diesel <input checked="" type="checkbox"/> Gas <input type="checkbox"/> Fuel Injection
<input type="checkbox"/> New <input checked="" type="checkbox"/> Used	City <b>Grand Blanc</b> State <b>MI</b> Zip Code <b>48439</b>	No Cylinders	

*Purchased new not used*

Transmission Type <input type="checkbox"/> Manual <input checked="" type="checkbox"/> Automatic	Antilock Brakes <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Restraint System <input type="checkbox"/> 3 Point Belt <input checked="" type="checkbox"/> Driverside Airbag <input type="checkbox"/> Motorbelt <input type="checkbox"/> 2-Point Belt <input checked="" type="checkbox"/> Passengerside Airbag	Cruise Control <input checked="" type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Drive Train <input checked="" type="checkbox"/> Front <input type="checkbox"/> Rear <input type="checkbox"/> 4-Wheel	Vehicle Type <input checked="" type="checkbox"/> Car <input type="checkbox"/> Van <input type="checkbox"/> Minivan <input type="checkbox"/> Sport Utl <input type="checkbox"/> Truck <input type="checkbox"/> Motorcycle <input type="checkbox"/> Other	Body Style <input type="checkbox"/> 2-Door <input checked="" type="checkbox"/> 4-Door <input type="checkbox"/> Stationwagon <input type="checkbox"/> Pick Up Truck <input type="checkbox"/> Other
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FAILED COMPONENT(S)/PART(S) INFORMATION

Component <b>12110000</b>	Part Name(s) <b>INTERIOR SYSTEMS: PASSIVE RESTRAINT: AIR BAG</b>	Location <input checked="" type="checkbox"/> Left <input checked="" type="checkbox"/> Right <input checked="" type="checkbox"/> Front <input type="checkbox"/> Rear	Failed Part(s) <input checked="" type="checkbox"/> Original <input type="checkbox"/> Replacement
No of Failures	Date(s) of Failure(s) <b>22-SEP-2000</b> Mileage at Failure(s) <b>49,000</b> Vehicle Speed at Failure(s) <b>W/A</b>	Failed Part(s) Available? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	NHTSA Previously Contacted? <input type="checkbox"/> Yes <input checked="" 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 checked="" type="checkbox"/> No	Fire <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Number of Persons injured	Number of Fatalities	Estimated Property Damage	Reported to Police <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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NARRATIVE DESCRIPTION OF FAILURE(S), INCIDENT(S), INJURY(IES)

THE SRS INDICATOR LIGHT KEEPS COMING ON IN VEHICLE. IT'S FAULTY DEFECTIVE PIECE. AIRBAGS NEEDED TO BE REPLACED. MANUFACTURE FELT NOT RESPONSIBLE FOR REPAIRS.\*AK

*The light is on continuously original air bags. Car has not been in an accident. See attached letter*

CONTINUE ON BACK IF NEEDED

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Date: October 6, 2000

From



RE: 97/Honda/ Accord Wagon Vehicle# 1HGCE1824VA008387

To: Customer Relations  
American Honda Motor Co., Inc.  
101 South Stanfield Road  
Troy, Ohio 45373

Dear Customer Relations:

On September 8<sup>th</sup>, 2000 my 1997 Honda Accord Wagon went to Honda of Grand Blanc, MI. For the 60,000 maintenance. I bought the car new and have taken it in for regular maintenance. This 1997 Honda has never been in an auto accident, jarred or hit. The air bags have never been deployed. About one month before taking the car for maintenance the SRS system light on the dash went on and stayed on. I drew this to the attention of the dealership. Later the dealership called to let me know that the SRS light had a faulty control unit and asked if I wanted it fixed. I asked if it was covered by warranty since the air bag was never deployed. The dealership said no. So I asked the cost to fix the system and they stated \$670.00. Needless to say I was shocked! So I declined service on the SRS unit.

When talking with the dealership they told me that other cars had come in with the same problem. If I am in an accident with this car the air bags will not deploy and my family or myself could be injured or killed. I do not feel this is my responsibility to pay to have this repaired. This is obviously a factory defect, and this car is not the first one with this SRS problem. However, if my family or myself are injured or killed because of this defect not being corrected an attorney will be hired.

I hope that you can correct this SRS problem not only with my car but for other Honda owners with the same problem. As you know vehicle model safety has become the central element of brand image. Since Congress mandated the dual front airbags, I feel it is your responsibility to take care of defects in the SRS system if the system has not been deployed.

Thank you for your attention and consideration in resolving this problem. I look forward to hearing from you

  
Eileen Patch

cc: NHTSA-National Highway Traffic Safety Administration  
Enclosures: Copy of invoice 09/08/00





**HONDA OF GRAND BLANC**  
A MEMBER OF THE AL SERRA TEAM

411825 SOUTH SARINAW STREET GRAND BLANC, MI 48439  
PHONE (810) 696-3390 (DDC) 525-3390 FAX (810) 694-4511  
WEB SITE: WWW.HONDA-GRANDBLANC.COM

STATE REGISTRATION F 128812

CUSTOMER NO. <b>5929</b>	ADVISOR <b>CHAD VANDERPOOL 102</b>	TRAC NO. <b>778</b>	INVOICE DATE <b>09/08/00</b>	INVOICE NO. <b>HOCS23814</b>
	LABOR RATE	LICENSE NO. <b>4CKM83</b>	COLOR	REGISTRATION
		V. LICENSE <b>58990</b>	DELIVERY DATE	DELIVERY MILE
	YEAR MAKE MODEL <b>97/HONDA/ACCORD WAGON</b>		SELLING DEALER P.O.	PRODUCTION DATE
	VEHICLE I.D. NO. <b>1HGCE1824VA 0.08387</b>		R.O. DATE <b>09/08/00</b>	ALL PARTS ARE NEW UNLESS SPECIFIED OTHERWISE
	COMMENTS			RELEASED BY

JOB# 4 TOTALS .....  
JOB# 5 CHARGES ..... JOB# 4 JOURNAL PREFIX HOCS JOB# 4 TOTAL 0.00

LABOR  
J# 5 01HOZ048 60000 MAINTENANCE HOURS: TECH(S): 104 271.40  
60000 MAINTENANCE  
SCHEDULED MAINTENANCE DUE TO TIME OR MILEAGE  
COMPLETED 60000 MAINTENANCE

PARTS	QTY	FP-NUMBER	DESCRIPTION	UNIT PRICE		
	1	15400-POH-305	FILTER, OIL 4908182	7.14	7.14	
	1	94109-14000	WASHER 14MM 0171875	0.35	0.35	
	1	08796-9008	FLUID, BRAKE DOT 44	6.00	6.00	
	1	3M-06880	HIGH PWR. BRAKED	6.42	6.42	
	1	12341-PT0-000	GASKET, CYL HD CV 3	11.93	11.93	
	4	98075-5514G	S/PLG ZFR5F-11 3303	4.86	19.42	
	3	08206-9001	FLUID, AT 3268554	6.63	19.89	
	1	90471-PX4-000	WASHER 18MM 3300935	2.79	2.79	
	1	30103-P08-033	HEAD ASSY, RCTOR 3	22.76	22.76	
	1	722C-PDA-A30	ELEMENT, AIR CLEA 4	19.74	19.74	
	4	06180-SH3A0-60	CAP MKCR2 3177466	1.16	4.64	
	10	D7JAZ-001302A	JOINT, TERMINAL 471	0.60	6.00	
	2	#10CLAMP	HOSE CLAMP POINT	1.60	3.20	
				TOTAL - PARTS	130.30	

G.O.G. & SUPPLIES  
1.0 4.0 QTS 5W30 0 5.200 /UNIT TOTAL - GOG 5.20

MISC. CODE DESCRIPTION CONTROL NO.  
PD \$10 OFF PARTS  
SD \$10 SERVICE DISCOUNT  
TOTAL - MISC -40.17

JOB# 5 TOTALS .....  
LABOR 271.40  
PARTS 130.30  
G.O.G. 5.20  
MISC -40.17

JOB# 5 JOURNAL PREFIX HOCS JOB# 5 TOTAL 366.73

MISC. CODE DESCRIPTION CONTROL NO.  
JOB # A SS SHOP SUPPLIES  
TOTAL - MISC 15.00

ESTIMATE  
CUSTOMER HEREBY ACKNOWLEDGES RECEIVING ORIGINAL ESTIMATE OF \$706.68 (+TAX)

COMMENTS  
CALL

INSURANCE CO  
APPROVED BY  
CLAIM NO

ATTENTION CASHIER		
DEBITIVE	AMOUNT	REMARKS

TERMS are cash on delivery. ESTIMATES WILL BE CHANGED 48 HOURS AFTER REPAIRS ARE COMPLETED. YOU RESPONSIBLE FOR LOSS OR DAMAGE TO THIS VEHICLE WHILE IN OUR CARE OR IN THE EVENT THAT THE REPAIRS ARE NOT COMPLETE. WE HAVE NO LIABILITY FOR DAMAGE TO THIS VEHICLE OR FOR LOSS OF TIME OR INCOME. WE HAVE NO LIABILITY FOR DAMAGE TO THIS VEHICLE OR FOR LOSS OF TIME OR INCOME. WE HAVE NO LIABILITY FOR DAMAGE TO THIS VEHICLE OR FOR LOSS OF TIME OR INCOME.

POWER OF ATTORNEY-KNOW ALL WELL TO THE EFFECTS THAT THE UNDERSIGNED HEREBY CONSENT AND AGREE TO THE SALE OF GRAND BLANC MY CAR AND TRUCK AND TO THE SALE OF THE CAR AND TRUCK TO THE BUYER AND TO THE BUYER'S CHECKS OR DRAFTS ISSUED BY THE BUYER. I HEREBY AGREE TO WAIVER MY RIGHT TO RETURN THE CAR OR TRUCK TO THE BUYER'S CHECKS OR DRAFTS ISSUED BY THE BUYER.

I have hereby authorized the above named person to act for me in the above named business.

THE ABOVE WORK HEREBY AUTHORIZED AND CONDITIONS AGREED TO AS FULLY SET FORTH ABOVE.

Sign: \_\_\_\_\_

All repairs and parts listed were furnished in accordance with the Manager's Order Vehicle Service and Repair Card.

REPAIRS PROPERLY COMPLETED AND ACCEPTED BY:

X. \_\_\_\_\_

THE ONLY WARRANTIES APPLYING TO THIS PARTY ARE THOSE WHICH MAY BE OFFERED BY THE MANUFACTURER. THE SELLING DEALER HEREBY EXPRESSLY DISCLAIMS ALL WARRANTIES, EITHER EXPRESS OR IMPLIED, INCLUDING ANY IMPLIED WARRANTIES OF MERCHANTABILITY OR FITNESS FOR A PARTICULAR PURPOSE, AND NEITHER ASSUMES NOR AUTHORIZES ANY OTHER PERSON TO ASSUME FOR IT ANY LIABILITY IN CONNECTION WITH THE SALE OF THIS PART(S) AND/OR SERVICE. BUYER SHALL NOT BE ENTITLED TO RECOVERY FROM THE SELLING DEALER ANY CONSEQUENTIAL DAMAGES, DAMAGES TO PROPERTY, DAMAGES FOR LOSS OF USE, LOSS OF TIME, LOSS OF PROFITS, OR INCOME OR ANY OTHER INCIDENTAL DAMAGES.

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