



U.S. Department of Transportation

National 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 241**

|                                  |              |
|----------------------------------|--------------|
| Data Received<br><br>31-OCT-2000 | Od_or _____  |
|                                  | rt_dt _____  |
|                                  | od_rt _____  |
|                                  | up_ltr _____ |
| Reference No.<br><br>874223      |              |

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>(Listed at front of windshield or drivers side)</small><br><b>1HFSC3232VA201091</b> | Vehicle Make<br><b>HONDA</b> | Vehicle Model<br><b>SHADOW</b> | Vehicle Year<br><b>1997</b> | Current Odometer Reading |
|---|------------------------------|--------------------------------|-----------------------------|--------------------------|

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

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

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

|                              |   |  |   |
|------------------------------|---|--|---|
| Component<br><b>08500000</b> | Part Name(s)<br><b>ELECTRICAL SYSTEM:IGNITION</b> | Location<br><input type="checkbox"/> Left <input type="checkbox"/> Right<br><input type="checkbox"/> Front <input type="checkbox"/> Rear | Failed Part(s)<br><input type="checkbox"/> Original<br><input type="checkbox"/> Replacement |
|------------------------------|---|--|---|

|                 |  |   |   |
|-----------------|--|---|---|
| No. of Failures | Date(s) of Failure(s) <b>15-MAY-2000</b> | Failed Part(s) Available?<br><input type="checkbox"/> Yes <input type="checkbox"/> No | NHTSA Previously Contacted?<br><input type="checkbox"/> Yes <input type="checkbox"/> No |
|                 | Mileage at Failure(s) <b>4500</b>        |   |   |
|                 | Vehicle Speed at Failure(s) _____        |   |   |

**APPLICATION INCIDENT INFORMATION**

(Please describe in detail the incident(s), Failure(s), Crash(es), and injury(ies) on the back of this form)


|  |   |                           |                      |                           |   |
|--|---|---------------------------|----------------------|---------------------------|---|
| Crash<br><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | Fire<br><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | Number of Persons Injured | Number of Fatalities | Estimated Property Damage | Reported to Police<br><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |
|--|---|---------------------------|----------------------|---------------------------|---|

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

**EXPERIENCING PROBLEM WITH STALLING DURING HIGHWAY SPEED INTERMITTENTLY. DEALER AWARE OF A DEFECTIVE IGNITION MODULE ON NATIONAL BACK ORDER. ASKING HELP FROM NHTSA IN THIS MATTER. PLEASE FEEL FREE TO PROVIDE ANY FURTHER DETAILS ON THIS MATTER. \*AK**

CONTINUED ON BACK PLEASE

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   |   | FOR AGENCY USE ONLY 241   |  |
|---|---|---|--|
|  U.S. Department of Transportation<br>National Highway Traffic Safety Administration   |   | <b>Vehicle Owner's Questionnaire (VOQ)</b><br>NATIONWIDE 1-888-DASH-2-DOT 60302<br>1-888-327-4236<br>www.nhtsa.dot.gov/hotline  |  |
| OWNER INFORMATION (Type or Print)   |   | Date Received<br>28 PHIL: 59<br>31-OCT-2000<br>OFFICE INVESTIGATION   |  |
| [Redacted] 652128   |   | Reference No.<br>874223   |  |
| Do you authorize NHTSA to provide a copy of report to the manufacturer of your vehicle?<br>In the absence of an authorization, NHTSA will NOT provide your name and address to the vehicle manufacturer.  |   | <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO   |  |
| Signature of Owner _____  |   | Date <u>11/20/00</u>  |  |
| VEHICLE INFORMATION   |   |   |  |
| Vehicle Ident. No. (VIN.) (Located at bottom of windshield on driver's side)  | Vehicle Make  | Vehicle Model   | Vehicle Year   |
| 1HFSCJ232VA201061   | HONDA   | SHADOW  | 1997   |
| Current Odometer Reading  |   |   |  |
| 5153  |   |   |  |
| Purchase Date   | Dealer's Name   | Engine Size (CID/CCIL)  | <input type="checkbox"/> Turbo Diesel Gas <input checked="" type="checkbox"/> Fuel Injection   |
| 7-20-98   | METRO Motorsports   | 1100cc  |  |
| <input checked="" type="checkbox"/> New <input type="checkbox"/> Used   | City <u>GLENDALE</u> State <u>AZ</u> Zip Code <u>85308</u>  | No Cylinders <u>2</u>   |  |
| Transmission Type   | Antilock Brakes   | Restraint System  | Cruise Control   |
| <input checked="" 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"/> Motorbelt <input type="checkbox"/> Driverside Airbag <input type="checkbox"/> 2-Point Belt <input type="checkbox"/> Passengerside Airbag | <input 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 type="checkbox"/> Car <input type="checkbox"/> Sport Utl <input type="checkbox"/> Van <input type="checkbox"/> Truck <input type="checkbox"/> Minivan <input checked="" type="checkbox"/> Motorcycle <input type="checkbox"/> Other |
|   |   |   | Body Style   |
|   |   |   | <input type="checkbox"/> 2-Door <input type="checkbox"/> 4-Door <input type="checkbox"/> Stationwagon <input type="checkbox"/> Pick Up Truck <input checked="" type="checkbox"/> Other   |
| FAILED COMPONENT(S)/PART(S) INFORMATION   |   |   |  |
| Component   | Part Name(s)  | Location  | Failed Part(s)   |
| 08600000  | ELECTRICAL SYSTEM:IGNITION<br>(Ignition Module)   | <input type="checkbox"/> Left <input type="checkbox"/> Right <input type="checkbox"/> Front <input type="checkbox"/> Rear   | <input checked="" type="checkbox"/> Original <input type="checkbox"/> Replacement  |
| No of Failures  | Date(s) of Failure(s)   | Failed Part(s) Available?   | NHTSA Previously Contacted?  |
| 5   | 15-MAY-2000 through Sept 30, 2000<br>Mileage at Failure(s) 4500<br>Vehicle Speed at Failure(s) 50 to 70 mph & city speeds | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No   | <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   | Fire  | Number of Persons Injured   | Number of Fatalities   |
| <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No   | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No   |   |  |
|   |   | Estimated Property Damage   | Reported to Police   |
|   |   |   | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No  |
| NARRATIVE DESCRIPTION OF FAILURE(S), INCIDENT(S), INJURY(IES)   |   |   |  |
| EXPERIENCING PROBLEM WITH STALLING DURING HIGHWAY SPEED INTERMITTENTLY. DEALER AWARE OF A DEFECTIVE IGNITION MODULE ON NATIONAL BACK ORDER. ASKING HELP FROM NHTSA IN THIS MATTER. PLEASE FEEL FREE TO PROVIDE ANY FURTHER DETAILS ON THIS MATTER. *AK<br>As may be seen by reviewing the attached repair invoices the dealer has attempted repair by replacing various parts including fuel pump, STAMER, jet replacement, carburetor cleaning & rebuilding and subsequent rejetting. failure of machine in heavy highway and street intersection traffic submitted rider and other to unnecessary dangers. Manufacturer is aware of part failures and has neglected to inform dealers and - |   |   |  |
| 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.   |   |   |  |

CONTINUE ON BACK IF NEEDED

Fold to show Return Address (no stamp needed) Fasten with tape or staple and mail

INFORMATION ON TIRE FAILURE(S) (IF APPLICABLE)

TIRE IDENTIFICATION NO.\*

D O T

MANUFACTURER/TIRE NAME

SIZE

\* The identification number consists of 7 to 10 letters and numerals following the letters DOT. It is usually located near the rim flange on the side opposite the whitewall or on either side of a blackwall tire.

NARRATIVE DESCRIPTION (CONTINUED)

customers. Honda America has not established a customer Hot Line or other means to contact or Notify the consumer of product safety issues. There have been multiple calls to Honda to reach a customer advocate without success. The lack of a toll free customer hot line further penalizes the calling customer by subjecting the caller to exorbitant long charges to discuss or report safety issues. Messages left with Honda's switchboard operator have never been returned. Local dealers are not fully informed by Honda of safety and/or service issues and are unable to properly intermeditate on their customers behalf. Trial and error repair attempts undermine their credibility with their customer result in unnecessary repair bills and create unwarranted danger to riders.

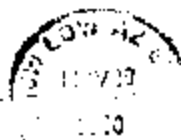


U.S. G.P.O. 1992 - 622-897 / 60096

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

400 Seventh St., S.W.  
Washington, D.C. 20590

Official Business  
Penalty for Private Use \$300



NO POSTAGE NECESSARY IF MAILED IN THE UNITED STATES

**BUSINESS REPLY MAIL**  
FIRST CLASS PERMIT NO. 73173 WASHINGTON, D.C.

POSTAGE WILL BE PAID BY MAIL HWY TRAFFIC SAFETY ADMIN.

U.S. Department of Transportation  
National Highway Traffic Safety Administration  
Information Management Staff NSA-10.01  
400 7th Street, SW  
Washington, DC 20590



NHTSA REFERENCE # 874223

31 OCT. 2000

METRO MOTORSPORTS

6161 W. BELL ROAD  
 GLENDALE, AZ 85308  
 (602) 843-5000

SERVICE REPAIR ORDER  
 Repair Order # 2017141

R O for [REDACTED]

Date Printed 7/26/00  
 Date In 7/21/00  
 Promised 7/21/00

Yr Make Model Color Class Plate M VIN Key Board# Hrs/Odom  
 97 HONDA SHADOW SILVER M ERS 1HFSC323VA201091 4177

Job: CHECK CARBS  
 Yr: 97 Make: HONDA Model: SHADOW Color: SILVER Class: M  
 RICH'S POOR  
 CUSTOMER THINKS IT MIGHT HAVE BEEN BAD GAS

Jet Kit →

| Parts           | Part #/Labor Code | Description               | Src | Cat | Tech | Hrs/Qty | Total  |
|-----------------|-------------------|---------------------------|-----|-----|------|---------|--------|
|                 | 081191            | JET KIT ACE SHADOW 9      | TR  | ATR |      | 1       | 79.95  |
|                 | 081267            | COBRA DRAG PIPE VT11      | TR  | ATR |      | 1       | 299.95 |
|                 | RED               | ETA TWO DAY DELVY.FREIGHT | 88  | SP  |      | 1       | 40.00  |
|                 | Misc - 3          | Special Handling Chg      |     | SP  |      | 1       | 6.00   |
|                 | 081172            | VT1100 JET KIT            | TR  | ATR |      | 1       | 79.95  |
|                 | 275500404         | 275500403                 | SD  | PSD |      | 0       | .00    |
|                 | RED               | ETA TWO DAY DELVY.FREIGHT | 88  | SP  |      | 1       | 40.00  |
|                 | 275500404         | 275500403                 | SD  | PSD |      | -1      | .00    |
|                 | RED               | ETA TWO DAY DELVY.FREIGHT | 88  | SP  |      | -1      | 40.00  |
|                 | 10291-MMB-888     | GASKET, EX. PIPE          | HD  | PHD |      | 2       | 11.28  |
|                 | 081191            | JET KIT ACE SHADOW 9      | TR  | ATR |      | -1      | 79.95  |
|                 | Misc - 11         | Special Handling Chg      |     | SP  |      | 1       | 16.00  |
| Labor           |                   | WRITER                    |     |     | GB   | .00     | .00    |
|                 |                   | INSTALL PIPES AND JET KIT |     |     | MB   | 3.50    | 222.25 |
| Supplies        |                   |                           |     |     |      |         | 10.00  |
| Job Subtotal \$ | 685.43            |                           |     |     |      |         |        |

| Job Breakdown -> | Parts  | Labor  | Sublet | Other | Total of all Jobs |  |
|------------------|--------|--------|--------|-------|-------------------|--|
|                  | 453.18 | 222.25 | .00    | 10.00 | 685.43            |  |

THANK YOU FOR CHOOSING US FOR YOUR SERVICE NEEDS!  
 PLEASE COME AGAIN

|                    |        |
|--------------------|--------|
| Before Tax Total   | 685.43 |
| Sales tax          | 28.08  |
| Repair Order Total | 713.51 |

**METRO MOTORSPORTS**

1000 N. 100th St  
 Edina, MN 55425  
 (612) 942-1000

**SERVICE REPAIR ORDER**

Repair Order # 2010053

NHTSA REFERENCE#

874223

31 OCT. 2000

A O for



Date Printed 10/31/00  
 Date In 10/31/00  
 Printed 11/00

Yr Make Model Color Class Plate # VIN Key Board Hrs/Min  
 97 HONDA Shadow1100 WHITE M 8F85 1HFM72220021053 5000

Job: OVER WHITE WASHING  
 Yr: 97 Make: HONDA Model: SHADOW1100 Color: WHITE Class: 4  
 NOTES: BATTERY TERMINALS WERE SOFTENED HARD STARTING  
 PART FOR TIGHTENING  
 TALKER TO CUSTOMER AND RECOMMENDED NEW BATTERY  
 PARTS NOT IN THE SHOP  
 PART IS SHOWN TO CUSTOMER FOR APPROVAL

| Part #/Labor Code   | Description                | Org | Est | Yrch | Use/Qty | Total  |
|---------------------|----------------------------|-----|-----|------|---------|--------|
| Parts 10712-ND0-A02 | PUMP COMP., FUEL           | HO  | 540 |      | 1       | 109.56 |
| 10700-ND0-A02       | STRAINER COMP., FUEL       | HO  | 440 |      |         | 11.00  |
| 1150                | ETS TWO DAY DELIV. FREIGHT | SH  | 50  |      | 1       | 20.00  |
| Part # 1            | Special Handling Chg       | SP  |     |      | 1       | 5.00   |
| Labor               |                            |     |     |      | 1.00    | 67.50  |
| Supplies            |                            |     |     |      |         | 3.00   |
| Job Subtotal *      |                            |     |     |      |         | 216.06 |

| Job       | Parts   | Labor | Sublet | Other | Total of all Jobs |
|-----------|---------|-------|--------|-------|-------------------|
| Breakdown | 10712-2 | 67.50 | .00    | 3.00  | 216.06            |

AND YOU WILL BE RESPONSIBLE FOR THE SEPARATE COSTS  
 PLEASE CONFIRM AGAIN

Before Tax Total 216.06  
 Sales Tax 22.00  
 Repair Order Total 238.06