

| 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 125 | |
|---|---|--|--|--|---|
| OWNER INFORMATION (Type or Print) | | | | Date Received | Od_or _____ rt_dt _____ od_rt _____ up_itr _____ |
| | | | | 17-JAN-2001 | |
| [REDACTED] 667084 | | | | Work Number | [REDACTED] |
| | | | | Home Number | |
| 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. | | | | | |
| Signature of Owner _____ | | | | Date ____/____/____ | |
| VEHICLE INFORMATION | | | | | |
| Vehicle Ident. No. (VIN) (located at bottom of windshield on driver's side) | | Vehicle Mak | Vehicle Mode | Vehicle Year | Current Odometer Reading |
| | | HONDA | ACCORD | 1996 | |
| Purchase Date | Dealer's Name _____ | | Engine Siz (CID/CC/L) | <input type="checkbox"/> Turbo <input type="checkbox"/> Diesel <input type="checkbox"/> Gas <input type="checkbox"/> Fuel Injectio | |
| <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 |
| <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"/> Motorbelt <input type="checkbox"/> Driverside Airbag <input type="checkbox"/> 2-Point Bel <input type="checkbox"/> Passengerside Airbag | | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | <input type="checkbox"/> Front <input type="checkbox"/> Rear <input type="checkbox"/> 4-Wheel |
| | | | | Vehicle Type | |
| | | | | <input type="checkbox"/> Car <input type="checkbox"/> Sport Ult <input type="checkbox"/> Van <input type="checkbox"/> Truck <input type="checkbox"/> Minivan <input 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 <input type="checkbox"/> Truck | |
| FAILED COMPONENT(S)/PART(S) INFORMATION | | | | | |
| Component 12111000 | Part Name(s) INTERIOR SYSTEMS: PASSENGER RESTRAINTS: AIR BAG: FRONT | | Location | | Failed Part(s) |
| | | | <input type="checkbox"/> Left <input type="checkbox"/> Right <input type="checkbox"/> Front <input type="checkbox"/> Rear | | <input type="checkbox"/> Original <input type="checkbox"/> Replacement |
| No of Failures | Date(s) of Failure(s) _____ Mileage at Failure(s) _____ Vehicle Speed at Failure(s) _____ | | Failed Part(s) | | NHTSA Previously |
| | | | <input type="checkbox"/> Yes <input type="checkbox"/> No | | <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) | | | | | |
| Crash | Fire | Number of Persons Injured | Number of Fatalities | Estimated Property Damag | Reported to Polic |
| <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | | | | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |
| NARRATIVE DESCRIPTION OF FAILURE(S), INCIDENT(S), INJURY(IES) | | | | | |
| CONSUMER WAS INVOLVED IN A FRONTAL COLLISION IN WHICH DRIVER'S AIR BAG DID NOT DEPLOY. PLEASE GIVE ANY FURTHER DETAILS.*AK | | | | | |
| | | | | | 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. | | | | | |