



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

Auto Safety Hotline

Vehicle Owner's Questionnaire

NATIONWIDE 1-800-424-9393
DC METRO AREA (202) 366-0123
INTERNET: <http://www.nhtsa.dot.gov>

FOR AGENCY USE ONLY 117

Date Received

25-JUN-2001

Od_or _____
rt_dt _____
pd_rt _____
rp_lr _____

Reference No.

891142

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) (Location at bottom of windshield and driver's side)	Vehicle Make	Vehicle Model	Vehicle Year	Current Odometer Reading
JH2SC26461M100031	HONDA MOTORCY	ST1100	2001	
Purchase Date	Dealer's Name	Engine Size (CID/CC/L)	☐ Turbo ☐ Diesel ☐ Gas ☐ Fuel Injection	
☒ New ☐ Used	City _____ State _____ Zip Code _____	No Cylinders _____		
Transmission Type	Antilock Brakes	Restraint System	Cruise Control	Drive Train
☐ Manual ☐ Automatic	☐ Yes ☒ No	☐ 3-Point Belt ☐ Motorbelt ☐ Driverside Airbag ☐ 2-Point Bel ☐ Passengerside Airbag	☐ Yes ☒ No	☐ Front ☐ Rear ☐ 4-Wheel
Vehicle Type	Body Style			
☐ Car ☐ Sport Utl ☐ Van ☐ Truck ☐ Minivan ☐ Motorcycle ☐ Other _____	☐ 2-Door ☐ 4-Door ☐ Stationwagon ☐ Pick Up Truck ☒ Other _____			

FAILED COMPONENT(S)/PART(S) INFORMATION

Component 13100000	Part Name(s) STRUCTURE:FRAME:MEMBERS AND BODY	Location ☐ Left ☐ Right ☐ Front ☐ Rear	Failed Part(s) ☐ Original ☐ Replacement
No of Failure	Date(s) of Failure(s) 21-APR-2001 2 Mileage at Failure(s)	Failed Part(s) ☐ 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	Number of Fatalities	Estimated Property Damag	Reported to Police ☐ Yes ☒ No
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NARRATIVE DESCRIPTION OF FAILURE(S), INCIDENT(S), INJURY(IES)

MOTORCYCLE WOULD PULL TO THE RIGHT WHILE DRIVING. TOOK MOTORCYCLE BACK TO DEALERSHIP. MECHANIC TESTED IT, AND INFORMED OWNER IT WENT RIGHT. REPRESENTATIVE DID NOT TEST MOTORCYCLE. . SERVICE MANAGER INDICATED FRAME WAS CAUSING WHEEL NOT TO BE PROPERLY ALIGNED, AND IT NEEDED REPAIRING. *AK

CONTINUE ON REVERSE

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.