



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 241

Date Received

06-JUL-2001

Ord. or
rt. dt
pd. rt
rp. ltr

Reference No.

892127

Work Number 270/441-6402

Home Number

OWNER INFORMATION (Type or Print)

STEVE CRICE 700961
ROUT 1 BOX 186AA
CUNNINGHAM KY 42035

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>(Location at bottom of and/or side of dashboard)</small>	Vehicle Make	Vehicle Model	Vehicle Year	Current Odometer Reading
PLEASE FILL IN	HONDA MOTORCY	SHADOW	2001	

Purchase Date	Dealer's Name _____	Engine Size (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	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"/> Driverside Airbag <input type="checkbox"/> Passengerside Airbag <input type="checkbox"/> Motorbelt <input type="checkbox"/> 2-Point Bel	<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 Utl <input type="checkbox"/> Truck <input type="checkbox"/> Motorcycle	<input type="checkbox"/> 2-Door <input type="checkbox"/> 4-Door <input type="checkbox"/> Stationwagon <input type="checkbox"/> Pick Up Truck <input type="checkbox"/> Other _____

FAILED COMPONENT(S)/PART(S) INFORMATION

Component 06470000	Part Name(s) FUEL THROTTLE LINKAGES AND CONTROL/MOTORCYCLE	Location <input type="checkbox"/> Left <input type="checkbox"/> Right <input type="checkbox"/> Front <input type="checkbox"/> Rear	Failed Part's <input type="checkbox"/> Original <input type="checkbox"/> Replacement
No of Failure	Date(s) of Failure(s) 19-JUN-2001 1000 Mileage at Failure(s) _____	Failed Part(s) <input type="checkbox"/> Yes <input type="checkbox"/> No	NHTSA Previously <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 <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Fire <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Number of Persons Injured	Number of Fatalitie	Estimated Property Damag	Reported to Polic <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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NARRATIVE DESCRIPTION OF FAILURE(S), INCIDENT(S), INJURY(IES)

AFTER OPENING THROTTLE MOTORCYCLE TOOK OFF IN NEUTRAL AND CAUSED IT TO FLIP OVER.
DEALER WAS NOTIFIED AND MADE REPAIRS AT CONSUMER'S EXPENSE. FEEL FREE TO PROVIDE ANY



DOT Auto Safety Hotline
Vehicle Owner's Questionnaire (VOQ)

U.S. Department of Transportation
 National Highway Traffic Safety Administration
 www.nhtsa.dot.gov/hotline
 1-888-327-4238

NATIONWIDE 1-888-DASH-2-DOT

OWNER INFORMATION (Type or Print)

FOR AGENCY USE ONLY 241
 Date Received: 01 AUG 28 2001
 Office: DEFECTS INVESTIGATION
 Reference No. 892127

Home Num
 Work Num

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

Vehicle Ident. No. (VIN) (Located at bottom of windshield on driver's side)
 HFS243041A03801

Vehicle Make

HONDA MOTORC

Vehicle Model

SHADOW

Vehicle Year

2001

Current Odometer Reading

2,040

Purchase Date

6-22-01

Dealers Name

Abernathys

New Used

City: Union City, State: IN, Zip Code: 38264

No. Cylinders: 2

Engine Size (CID/CCL): 1100

Turbo Diesel Gas Fuel Injection

Transmission Type

Manual Automatic

Antilock Brakes

Yes No

Restraint System

3 Point Belt Motorbelt 2-Point Belt Passenger Side Airbag No

Cruise Control

Yes No

Drive Train

Front Rear 4-Wheel

Vehicle Type

Car Sport Utl Truck Motorcycle Other

Body Style

2-Door 4-Door Stationwagon Pick Up Truck Other

No of Failures

Date(s) of Failure(s): 19 JUN 2001
 Mileage at Failure(s): 1000
 Vehicle Speed at Failure(s):

Failed Part(s) Available? Yes No
 NHTSA previously contacted? Yes No

Component 06470000

Part Name(s) FUEL THROTTLE LINKAGES AND CONTROL MOTORCYCLE

Location: Left Front Rear Right
 Failed Part(s): Original Replacement

FAILED COMPONENT(S)/PART(S) INFORMATION

Crash	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Fire	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Number of Persons Injured	0	Number of Failures	0	Estimated Property Damage	\$350.00	Reported to Police	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
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NARRATIVE DESCRIPTION OF FAILURE(S), INCIDENT(S), INJURY(ES)

AFTER OPENING THROTTLE MOTORCYCLE TOOK OFF IN NEUTRAL AND CAUSED IT TO FLIP OVER. DEALER WAS NOTIFIED, AND MADE REPAIRS AT CONSUMER'S EXPENSE. FEEL FREE TO PROVIDE ANY FURTHER DETAILS ON THIS MATTER. *AK

I think that the motorcycle jumped in gear by itself before I was ready. Kickstand was down, it both feet were on the ground.

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