



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 1038

Date Received

11-JUL-2001

Od_or _____
rt_dt _____
pd_rt _____
rp_lr _____

Reference No.

892459

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 door)	Vehicle Make	Vehicle Model	Vehicle Year	Current Odometer Reading
N/A	ACURA	LEGEND	1991	
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 ☐ Driverside Airbag ☐ Passengerside Airbag ☐ Motorbelt ☐ 2-Point Bel	☐ Yes ☒ No	☐ Front ☐ Rear ☐ 4-Wheel
Vehicle Type	Body Style			
☐ Car ☐ Van ☐ Minivan ☐ Other	☐ Sport Util ☐ Truck ☐ Motorcycle ☐ Other		☐ 2-Door ☐ 4-Door ☐ Stationwagon ☐ Pick Up Truck ☐ Other	

FAILED COMPONENT(S)/PART(S) INFORMATION

Component 15600000	Part Name(s) EQUIPMENT:ELECTRIC EQUIPMENT:RADIO:TAPE DECK ETC.	Location ☐ Left ☐ Right ☐ Front ☐ Rear	Failed Part(s) ☐ Original ☐ Replacement
No of Failure	Date(s) of Failure(s) 01-MAR-2001 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 Damage	Reported to Police ☐ Yes ☒ No
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NARRATIVE DESCRIPTION OF FAILURE(S), INCIDENT(S), INJURY(IES)

CONSUMER CONTACTED DEALER IN REFERENCE TO RECALL NUMBER 01V053000/ MANUFACTURER'S RECALL 01-015. DEALER STATED PARTS WERE NOT AVAILABLE UNTIL FURTHER NOTICE. *AK

COPIES OF THIS FORM ARE:

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.



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

1038

Date Received

01 AUG 16 AM 10:11

11 JUL 2001

OFFICE

DEFECTS INVESTIGATION

Od or

rt dt

od rt

up ltr

Reference No.

892459

Work Number

Home Number

OWNER INFORMATION (Type or Print)

701913

Do you authorize NHTSA to provide a copy of report to the manufacturer of your vehicle?
In the absence of a signature, please print name and address to the vehicle manufacturer.

☒ YES

☐ NO

Signature of Owner

Date 8/4/01

VEHICLE INFORMATION

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

N/A

Vehicle Make

ACURA

Vehicle Model

LEGEND

Vehicle Year

1991

Current Odometer Reading

138,000

Purchase Date

Dealer's Name

Engine Size

(C/D/C/L)

☐ Turbo

☐ Diesel

☐ Gas

☐ Fuel Injection

☒ New ☒ Used

City

State

Zip Code

No Cylinders

Transmission Type

☐ Manual

☐ Automatic

Antilock Brakes

☐ Yes

☒ No

Restraint System

☐ 3-Point Belt

☐ Motorbelt

☐ Driverside Airbag

☐ 2-Point Belt

☐ Passengerside Airbag

Cruise Control

☐ Yes

☒ No

Drive Train

☐ Front

☐ Rear

☐ 4-Wheel

Vehicle Type

☐ Car

☐ Van

☐ Minivan

☐ Other

☐ Sport Utl

☐ Truck

☐ Motorcycle

Body Style

☐ 2-Door

☐ 4-Door

☐ Stationwagon

☐ Pick Up Truck

☐ Other

FAILED COMPONENT(S)/PART(S) INFORMATION

Component
16600000

Part Name(s)

EQUIPMENT:ELECTRIC EQUIPMENT:RADIO:TAPE DECK ETC.

Location

☐ Left

☐ Front

☐ Right

☐ Rear

Failed Part(s)

☐ Original

☐ Replacement

No. of Failures

Date(s) of Failure(s)

01-MAR-2001

Mileage at Failure(s)

Vehicle Speed at Failure(s)

Failed Part(s)

Available?

☐ Yes ☐ No

NHTSA Previously

Contacted?

☐ 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 Damage

Reported to Police

☐ Yes ☒ No

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

CONSUMER CONTACTED DEALER IN REFERENCE TO RECALL NUMBER 01V053000/
MANUFACTURER'S RECALL 01-015. DEALER STATED PARTS WERE NOT AVAILABLE UNTIL
FURTHER NOTICE. *AK

→ PARTS FINALLY ARRIVED AT DEALER AND REPLACED
ON 7/30/01.
→ NO LONGER AN ISSUE.

CONTINUE ON BACK IF NEEDED

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