



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 936

Date Received

02-NOV-2001

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

Reference No.

898679

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 above windshield)</small>	Vehicle Make	Vehicle Model	Vehicle Year	Current Odometer Reading		
1HGCD7156TA031242	HONDA	ACCORD	1996			
Purchase Date <input type="checkbox"/> New <input checked="" type="checkbox"/> Used	Dealer's Name _____ City _____ State _____ Zip Code _____		Engine Size (CID/CC/L) _____ No. Cylinders _____	<input type="checkbox"/> Turbo <input type="checkbox"/> Diesel <input type="checkbox"/> Gas <input type="checkbox"/> Fuel Injectio		
Transmission Type <input type="checkbox"/> Manual <input type="checkbox"/> Automatic	Antilock Brakes <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Restraint System <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	Cruise Control <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Drive Train <input type="checkbox"/> Front <input type="checkbox"/> Rear <input type="checkbox"/> 4-Wheel	Vehicle Type <input type="checkbox"/> Car <input type="checkbox"/> Sport Util <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 Truck <input type="checkbox"/> Other _____

FAILED COMPONENT(S)/PART(S) INFORMATION

Component 06011080 12421000	Part Name(s) FUEL: LPG GAUGE: FLOAT: SENDER INTERIOR SYSTEMS: INSTRUMENT PANEL: GAUGE: INDICATOR: G)	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 0	Dates of Failure(s) 02-SEP-2001 Mileage at Failure(s) 87000 Vehicle Speed at Failure(s) 0	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 type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Fire <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Number of Persons Injured 0	Number of Fatalities 0	Estimated Property Damag	Reported to Police <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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NARRATIVE DESCRIPTION OF FAILURE(S), INCIDENT(S), INJURY(IES)

GAS GAUGE, AND SENDING UNIT DID NOT WORK PROPERLY. THIS CAUSED GAS GAUGE NOT TO GIVE AN ACCURATE READING. PLEASE PROVIDE ANY FURTHER INFORMATION.*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.



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

U.S. Department of Transportation
 National Highway Traffic Safety Administration
 NATIONWIDE 1-888-DASH-2-DOT
 1-888-327-4236
 www.nhtsa.dot.gov/hotline

OWNER INFORMATION (Type or Print)

724504

Reference No. /698679

DATE RECEIVED
 23 NOV 2001
 8 PM

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: [Redacted] Date: 11/5/01

Work Number: [Redacted]
 Home Number: [Redacted]

Vehicle Ident. No. (VIN): (located in bottom of windshield or driver's side) 1HGCD756TAA031242
 Vehicle Make: HONDA
 Vehicle Model: ACCORD
 Vehicle Year: 1996
 Current Odometer Reading: 92591

Purchase Date: [Redacted]
 Dealer's Name: 1st Choice Auto Sales
 City: [Redacted] State: KS Zip Code: [Redacted]
 Engine Size: (CC/DI/C) 2.2L
 Turbo: Diesel: Gas: Fuel Injectio:

Transmission Type: Manual Automatic
 Restraint System: 3-Point Belt 2-Point Belt Passenger-side Airbag
 Cruise Control: Yes No
 Drive Type: Front Rear 4-Wheel
 Vehicle Type: Car Van Minivan Other
 Body Style: Sport Util Truck Stationwagon Pick Up Truck

FAILED COMPONENT(S)/PART(S) INFORMATION
 Component: 06011080
 Part Name(s): FUEL:PG GAUGE:FLOAT:SENDER
 Interior System/Instrument Panel: GAUGE:INDICATOR:G
 Location: Front Left Right
 Failed Parts: Original Replacement

APPLICATION INCIDENT INFORMATION
 (Please describe in detail the incident(s), failure(s), crash(es), and injury(ies) on the back of this form)
 No of Failures: 0
 Date(s) of Failure(s): 02-SEP-2001
 Mileage at Failure(s): 87000
 Vehicle Speed at Failure(s): 0
 Crash: Yes No
 Fire: Yes No
 Number of Persons Injured: 0
 Number of Fatalities: 0
 Estimated Property Damage: [Redacted]
 Reported to Police: Yes No

NARRATIVE DESCRIPTION OF FAILURE(S), INCIDENT(S), INJURY(IES)
 GAS GAUGE, AND SENDING UNIT DID NOT WORK PROPERLY. THIS CAUSED GAS GAUGE NOT TO GIVE AN ACCURATE READING. PLEASE PROVIDE ANY FURTHER INFORMATION, IF AK

COMPLETION BACK REQUIRED
 The Privacy Act of 1974 (Public Law 93-578) 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.

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 9 T 8 9 S Y D Y 9 9

MANUFACTURER/TIRE NAME Toys

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)

Toys Spectrum Tires

Tearing Radials

P195/60 R15 87J 44PSI

★ U.S. G.P.O.: 1992 - 523-867 / 80089

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 NATL 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

