


DOT Auto Safety Hotline Vehicle Owner's Questionnaire TO REPORT VEHICLE SAFETY DEFECTS 1-888-DASH-2-DOT (1-888-327-4238) INTERNET: www.nhtsa.dot.gov/hotline		FOR AGENCY USE ONLY	
 U.S. Department of Transportation National Highway Traffic Safety Administration		Date Received RECEIVED 07 JAN 14 PM 9:11	Od_or _____ r_ct _____ od_rt _____ up_ltr _____ Reference No. 10003741
OWNER INFORMATION (Type or Print)		OFFICE DEFECTS INVESTIGATION	
Name		Daytime Telephone Number	
Street No.		Apt. No.	
City Pine Hill		State Al	
Do you authorize NHTSA to provide a copy of this report to the manufacturer of your vehicle? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO In the absence of an authorization, NHTSA WILL NOT provide your name or address to the vehicle manufacturer.		Date 12.13.02	
Signature of Owner			
PRODUCT INFORMATION			
Vehicle Identification No. (VIN) (17 Digits) K M H W F 2 5 S 3 Y A 1 4 9 2 5 8		Make Hyundia	Model Sinata
Year 2000			
Purchased Date 6/30/01	Dealer's Name Victor Nissan, Chrysler, Plymouth, Dodge, Jeep		Engine Size (CID/CC/L) No. Cylinders 6
<input type="checkbox"/> New <input checked="" type="checkbox"/> Used	Dealer's City Selma	State Al	Zip Code 36701
Manufacture Date (on driver's door or pillar) n/a/	Transmission Type <input type="checkbox"/> Manual <input checked="" type="checkbox"/> Automatic	Restraint System <input checked="" type="checkbox"/> Driver's Side Air Bag <input type="checkbox"/> Motor Bell <input checked="" type="checkbox"/> Passenger Side Air Bag <input type="checkbox"/> 2-Point Belt <input checked="" type="checkbox"/> 3-Point Belt	Cruise Control <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
		Drivetrain <input checked="" type="checkbox"/> Front <input type="checkbox"/> Rear <input type="checkbox"/> 4-Wheel	Vehicle Type <input checked="" type="checkbox"/> Car <input type="checkbox"/> Sport Utility <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 checked="" type="checkbox"/> 4-Door <input type="checkbox"/> Stationwagon <input type="checkbox"/> Pick Up Truck <input type="checkbox"/> Other	
FAILED COMPONENT(S)/PART(S) INFORMATION			
Part Name(s) n/a/		Location <input type="checkbox"/> Left <input checked="" type="checkbox"/> Front <input type="checkbox"/> Right <input type="checkbox"/> Rear	Failed Part(s) <input type="checkbox"/> Original n/a <input type="checkbox"/> Replacement
		Handicap Adaptive Equip <input type="checkbox"/> Yes <input type="checkbox"/> No n/a	
TO BE COMPLETED WHEN REPORTING A TIRE FAILURE			
Tire Brand		Tire Name	Complete Tire Size
No. of Failures	Date(s) of Failure(s)	Failed Part(s) Available?	NHTSA Previously Contacted?
	Mileage at Failure(s)	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
	Vehicle Speed at Failure(s)		
APPLICABLE INCIDENT INFORMATION (Please describe in detail the incident(s), Failure(s), Crash(es), and Injury(ies). Attach photos if available.)			
Crash <input type="checkbox"/> Yes <input type="checkbox"/> No	Fire <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Number of Persons Injured -0-	Number of Fatalities -0-
		Reported to Manufacturer <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Narrative Description of incident(s), Failure(s), Crash(es), and Injury(ies).			
<p>Michael George went to the store, approximately 2 miles from his home. He returned home (son and self) and got out of vehicle. His wife and friend were visiting inside and approximately 20 minutes after entering home, he walked outside. He looked at his vehicle and it was blazing on the inside. First thing that came to mind was fire extinguisher and he called wife to bring extinguisher and opened the door, the blaze grew larger upon his opening the door. He got the extinguisher and upon pulling the pin and squeezing the trigger he found that extinguisher was empty.</p>			
Continue on back.			
The Privacy Act of 1974 - Public Law 93-579 This information is requested pursuant to 49 U.S.C. Chapter 301. You are under no obligation to respond to this questionnaire. Your response may be used to assist NHTSA in determining whether a manufacturer should take appropriate action to correct a safety defect. If 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.			

Narrative Description of Incident(s), Failure(s), Crash(es), and Injury(ies)

He called to wife to bring another extinguisher and by that time the fire was raving, and the only thing that he could do was leave and everyone was calling to him to get away from the vehicle.

The inside of the car was blazing, and the steering wheel was already melted.

When I cut the cars off, upon arriving home, prior to the fire, I heard a sound like a long lasting grunt, but I did not think anything of it, I even left the keys in the car.

ATTACH ADDITIONAL SHEETS IF NECESSARY

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
Office of Defects Investigation, NSA-10.01
400 7th Street, SW
Washington, DC 20590



Complete and return or place in your car manual for future use



VEHICLE OWNER'S

QUESTIONNAIRE

(V00)

DOT AUTO SAFETY HOTLINE

TO REPORT VEHICLE SAFETY DEFECTS
COMPLETE THIS FORM

OR

DASH 2 DOT

and dial toll free at

1-888-DASH-2-DOT

1-888-327-4236

DOT Auto Safety Hotline
(DASH) 2 DOT



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