



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

DOT Auto Safety Hotline  
**Vehicle Owner's Questionnaire**  
To Report Vehicle Safety Defects  
1-888-DASH-2-DOT 2013 MAY -1  
(1-888-327-4236)  
INTERNET: www.nhtsa.dot.gov/hotline

FOR AGENCY USE ONLY 100079

Date Received 2003 APR 21  
2003 APR 21  
2003 APR 21

Repository   
10027  
Reference No.  
10012170

OWNER INFORMATION (Type or Print)

Name [REDACTED]  
Address [REDACTED]  
City HOBOKEN State NJ Zip Code [REDACTED]

Daytime Telephone Number [REDACTED]  
Evening Telephone Number [REDACTED]  
E-mail Address [REDACTED]

Do you authorize NHTSA to provide a copy of this report to the manufacturer of your vehicle?  YES  NO  
In the absence of an authorization, NHTSA WILL NOT provide your name or address to the vehicle manufacturer.  
Signature of Owner \_\_\_\_\_ Date 1/1

VEHICLE INFORMATION

Make KIA Model SPECTRA Model Year 2003  
VIN XNAPB121435213294  
Date Purchased 2-16-02 Dealer's Name and Telephone Number Brown Dambkia  
Engine: No. Cylinders Fuel Type:  
Original Owner [REDACTED] Dealer's City 1650 Butler St. EASTON PA Zip Code 18042  
Transmission Type Automatic  Antilock Brakes  Cruise Control Powertrain  
Vehicle Component Code 150000 SEAT BELTS  
Multiple Failure: 1

FAILED COMPONENT(S)/PART(S) INFORMATION

Incident Date(s) 20-MAR-2003 Failure Mileage Failure Speed

ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A TIRE FAILURE

Tire Make Tire Model (Name or Number) Tire Size (Example P215/65R15)  
DOT No. (Example: DOTM19ABC036)  Original Equipment  Prior Repair Failure Location:  
Tire Component Code Tire Failure Type

ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A CHILD SEAT FAILURE

Make: Date Manufactured: Model No./Name:  
Seat Type: Installation System:  
Child Seat Component Code: Failed Part:

APPLICABLE INCIDENT INFORMATION

(Please describe in detail the incident(s), failure(s), crash(es), and injury(ies).)

Crash  Yes  No Fire  Yes  No  
Number of Persons Injured Number of Deaths Reported to Police N

Narrative Description of Incident(s), Crash(es), and Injury(ies).  
Please describe (1) events leading up to the failure, (2) failure and its consequences, and (3) what was done to correct the failure; i.e. parts repaired or replaced (and if old part is available).

THE BACK PASSENGER SEAT BELTS WERE NOT LONG ENOUGH TO HOLD A 135 POUND PASSENGER. \*NLM  
On March 6, 2003 I left my car on the service center for them to fix seat belts, misalign door, light on the rear end, wipers and a noise aka like a pull. the manager said it was the engine.  
They fix the seat belt. Now they fit.

Include, if available: Police/Fire Department Report, Photos, and Repair Invoice. ATTACH ADDITIONAL SHEETS IF NECESSARY.

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.



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FDR AGENCY USE ONLY 10079

Date Received

20-MAR-2003

Repository

Reference No.  
10012187

**OWNER INFORMATION (Type or Print)**

Name: [Redacted]  
Address: [Redacted]  
City: HOBOKEN State: NJ Zip Code: [Redacted]

Daytime Telephone Number

E-mail Address

Evening Telephone Number

Do you authorize NHTSA to provide a copy of this report to the manufacturer of your vehicle?  YES  NO  
In the absence of an authorization, NHTSA WILL NOT provide your name or address to the vehicle manufacturer.

Signature of Owner: \_\_\_\_\_ Date: / /

**VEHICLE INFORMATION**

17 digit Vehicle Identification Number Located at bottom of windshield on driver's side: KNAF8121435213284  
Make: KIA Model: SPECTRA Model Year: 2003

Date Purchased: 4-16-03 Dealer's Name and Telephone Number: Brown Daws Kia Engine: No. Cylinders: Fuel Type:

Original Owner:  Dealer's City: 1650 Butler ST EASTON State: PA Zip Code: 18042

Transmission Type: Automatic  Antilock Brakes  Cruise Control  Powertrain: Vehicle Component Code: 060000 ENGINE AND ENGINE COOLING Multiple Failure: 1

**FAILED COMPONENT(S)/PART(S) INFORMATION**

Incident Date(s): 20-MAR-2003 Failure Mileage: Failure Speed:

**ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A TIRE FAILURE**

Tire Make: Tire Model (Name or Number): Tire Size (Example P215/85R15):

DOT No. (Example: DOTM19ABC036)  Original Equipment  Prior Repair Failure Location:

Tire Component Code: Tire Failure Type:

**ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A CHILD SEAT FAILURE**

Model: Date Manufactured: Model No./Name:

Seat Type: Installation System:

Child Seat Component Code: Failed Part:

**APPLICABLE INCIDENT INFORMATION**

(Please describe in detail the incident, failure, crash, and injury.)

Crash:  Yes  No Fire:  Yes  No Number of Persons Injured: Number of Deaths: Reported to Police: N

Narrative Description of Incident(s), Crash(es), and Injury(es).  
Please describe (1) events leading up to the failure, (2) failure and its consequences, and (3) what was done to correct the failure; i.e. parts repaired or replaced (and if old part is available).

THE ENGINE MADE A HORRIBLE NOISE. THE DEALER INSPECTED THE VEHICLE BUT COULD NOT DUPLICATE THE PROBLEM. \*NHTSA  
On March 6 I took the car to the service center. I told the manager Kim. About the problem that the car has. She took a ride with me to try the car. And she notice what I was talking about. She says that it was the engine. My brother practice mechanic in P.R. had told me it sound like the transmission. →

Include, if available, Police/Fire Department Report, Photos, and Repair Invoice. ATTACH ADDITIONAL SHEETS IF NECESSARY

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

But nothing was done to the car because they says they couldn't detect the problem. But it's <sup>fill</sup> making that noise that fills like a pulling. The car stayed at the shop from 3-16-03 to 3-20-03 when I questioned Kim about why the noise was not fixed, she stated that "she drove the car for 90 miles and that KIA's are suppose to make that noise."

Why question is if KIA's are suppose to make that noise why did she not say that the first time the noise was brought up to her?

ATTACH ADDITIONAL SHEETS IF NECESSARY

US 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 72173 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, NVS-216  
400 7th Street, SW  
Washington, DC 20590



**VEHICLE  
OWNER'S**

**QUESTIONNAIRE**

**DOT AUTO SAFETY HOTLINE**

TO REPORT VEHICLE SAFETY DEFECTS  
COMPLETE THIS FORM  
ON

**DASH2DOT**

and dial toll free at

**1-888-DASH-2-DOT**

1-888-327-4236

DOT Auto Safety Hotline  
(DASH) & DOT



US Department of Transportation  
National Highway Traffic Safety  
Administration  
http://www.nhtsa.gov



U.S. Department  
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Date Received

Repository

20-MAR-2003

Reference No.  
10012169

**OWNER INFORMATION (Type or Print)**

Name: [Redacted]  
Address: [Redacted]  
City: HOBOKEN State: NJ Zip Code: [Redacted]

Daytime Telephone Number: [Redacted] E-mail Address: [Redacted]

Do you authorize NHTSA to provide a copy of this report to the manufacturer of your vehicle?  YES  NO  
In the absence of an authorization, NHTSA WILL NOT provide your name or address to the vehicle manufacturer.

Signature of Owner: [Redacted] Date: 3/11/03

**VEHICLE INFORMATION**

17 digit Vehicle Identification Number located at bottom of windshield on driver's side: KNAFB121435213284  
Make: KIA Model: SPECTRA Model Year: 2003  
Date Purchased: 9-16-02 Dealer's Name and Telephone Number: Brown-Daub 1650 Butler ST  
Original Owner:  Dealer's City: Easton PA. State: P.A. Zip Code: 18042  
Engine: No. Cylinders: Fuel Type:  
Transmission Type:  Antilock Brakes: Powertrain: Vehicle Component Code: 162300 STRUCTURE: BODY: DOOR  
 Automatic  Cruise Control Multiple Failure: 1

**FAILED COMPONENT(S)/PART(S) INFORMATION**

Incident Date(s): 20-MAR-2003 Failure Mileage: Failure Speed:

**ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A TIRE FAILURE**

Tire Make: Tire Model (Name or Number): Tire Size (Example P215/65R15)  
DOT No. (Example: DOTM14BABC088)  Original Equipment  Prior Repair Failure Location:  
Tire Component Code: Tire Failure Type:

**ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A CHILD SEAT FAILURE**

Label: Date Manufactured: Model No./Name:  
Seat Type: Installation System:  
Child Seat Component Code: Failed Part:

**APPLICABLE INCIDENT INFORMATION**

(Please describe in detail the incident, failure(s), crash(es), and injury(ies).)

Crash  Yes  No Fire  Yes  No Number of Persons Injured: Number of Deaths: Reported to Police: #

Narrative Description of Incident(s), Crash(es), and Injury(ies).  
Please describe (1) events leading up to the failure, (2) failure and its consequences, and (3) what was done to correct the failure, e. parts repaired or replaced (and if not part is available).

SHOW ENTERED THE VEHICLE, WHICH CAUSED THE DOOR NOT TO OPEN. "MM"  
I took the car twice to the Service Center to correct this problem. The door was misaligned they fixed the lights on the rear end and the car failed the inspection because the lights are not working.

Include, if available: Police/Fire Department Report, Photos, and Repair Invoice. ATTACH ADDITIONAL SHEETS IF NECESSARY.

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

On The day OF The blizzard The car got  
SNOWED on the rear seat by The right door.  
I took The car to The Service center, Two  
times

First time February 27  
Second time March 7e

ATTACH ADDITIONAL SHEETS IF NECESSARY

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National Highway  
Traffic Safety  
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DOT Auto Safety Hotline  
(DASH) & DOT



U.S. Department of Transportation  
National Highway Traffic Safety  
Administration  
http://www.dot.gov/odiv



U.S. Department  
of Transportation  
National Highway  
Traffic Safety  
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Date Received

20-MAR-2003

Repository

Reference No.  
10012177

OWNER INFORMATION (Type or Print)

Name

Address

City

HOBOKEN

State NJ

Zip Code

Daytime Telephone Number

E-mail Address

Evening Telephone Number

Do you authorize NHTSA to provide a copy of this report to the manufacturer of your vehicle?  YES  NO

In the absence of an authorization, NHTSA WILL NOT provide your name or address to the vehicle manufacturer.

Signature of Owner

Date 3/20/03

VEHICLE INFORMATION

17 digit Vehicle Identification Number Located at bottom of windshield on driver's side  
KNAFB121435213284

Make  
KIA

Model  
SPECTRA

Model Year  
2003

Date Purchased

Dealer's Name and Telephone Number

Engine:  
No. Cylinders

Fuel Type:

Original Owner

Dealer's City

State

Zip Code

Transmission Type

Anti-lock Brakes

Powertrain

Vehicle Component Code

136000 WSHIELD WIPER/WASHER

Cruise Control

Multiple Failure: 2

FAILED COMPONENT(S)/PART(S) INFORMATION

Incident Date(s)  
20-MAR-2003

Failure Mileage

Failure Speed

ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A TIRE FAILURE

Tire Make

Tire Model (Name or Number)

Tire Size (Example P215/65RT5)

DOT No. (Example: DOTM19ABC036)

Original Equipment  
 Prior Repair

Failure Location:

Tire Component Code

Tire Failure Type

ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A CHILD SEAT FAILURE

Make:

Date Manufactured:

Model No./Name:

Seat Type:

Installation System:

Child Seat Component Code:

Failed Part:

APPLICABLE INCIDENT INFORMATION

(Please describe in detail the incident(s), failure(s), condition, and remedy.)

Crash

Yes  No

Fire

Yes  No

Number of Persons Injured

Number of Deaths

Reported to Police

N

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

Please describe (1) events leading up to the failure, (2) failure and its consequences, and (3) what was done to correct the failure; i.e. parts repaired or replaced (and if old part is available).

THE VEHICLES WINDSHIELD WIPERS FAILED INTERMITTENTLY. THE DEALER REPLACED THE WINDSHIELD MOTOR YET THE PROBLEM PERSISTED. \*NLM

When I put the wipers on the slowest <sup>wipers</sup> the car makes click noise

The rear end lights were fixed 3-6-03  
I took car for inspection on 3-28-03 and  
the vehicle did not pass because the lights  
are not fixed.

Include, if available: Police/Fire Department Report, Photos, and Repair Invoice.

ATTACH ADDITIONAL SHEETS IF NECESSARY.

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April 16, 2003

To whom it my concern:

My name is [REDACTED] and I live in [REDACTED] Hoboken, NJ [REDACTED]. On September 16, 2002 I bought myself a new Kia Spectra 2003. With that purchase I only have had problems. I am not satisfied with the quality or security of the car. In less than six month I had take this car 4 times to the Service Department for different problems:

1: On the winter storm that we had on February I found snow on the rear seat on the right side. The car makes a wear noise and feels like a pull. On February 28 I took it to the Service Department and they said that nothing was wrong, then they realize that the door was misalign, and they gave me at appointment for March 06, 2003.

2: On March 06, 2003 I took my car back to the Service Department on that day they realigned the door. Fix the light lights on the right side on the rear end. And change the wipers, this wipers were change because Kim the manager of the tested to check my complain about the noise and she realize that the wipers was nor working properly. Kim tested the car and felt the problem that I was talking about. They stay with the car until March 20, 2003.

3: On March 28, 2003 I took my car for inspection and failed the inspection. Because the same light that they fix was bad again.

4: On April 02, 2003 I took my car again to the Service Department for them to fix the light and I also complain about the noise that I m concern about now even when you shift the shifter from parking to reverse it makes the noise. The wipers when they are in the lowest velocity may a loud click sound.

5: On April 7, 2003 I took the car to the Service Department again because that noise and the pull have me very nervous. The car stays until April 7, 2003. Nothing was done to the car.

They being saying that every single problem that the car have is normal on the Kia Cars. My brother is a mechanic in Puerto Rico and he was here in February and he says that there is a problem with the transmission I also took the car to mechanical shop for them to hear the noise, I did not let them touch the car because I don't want to loose the guaranty. And they also said that there is a problem with the car. I don't feel save in the car specially that most of the time I have my mother with me. They said that if anything happens they have a toe service 24 hours a day. That does not satisfy me, because I bought the new car specting not to have so many problems.

Please help me giving advise or intruction on what to do. I really appreciate it.

Thank You,  
[REDACTED]



# VEHICLE INSPECTION REPORT

THIS IS AN OFFICIAL RECORD WHICH MUST BE PRESENTED IF THE VEHICLE IS TO BE REINSPECTED. IF LOST, A DUPLICATE RECORD MAY BE OBTAINED FROM THE FACILITY WHICH PERFORMED THE INSPECTION.

### FACILITY INFO

Jersey City  
177 Roosevelt Ave.  
Jersey City, NJ 07304  
  
(888)656-6867  
Facility ID: CIF000039  
Analyzer: CL001102

### VEHICLE INFO

VIN: KNAFB121435213294  
Plate: NSS89L NJ  
Veh Type: Passenger  
Year: 2003  
Make: KIA  
Odometer: 4658  
GVWR: 3660  
Model: SPECTRA  
ETW: 3000  
Old Inspection Expiration Date: 02/28/2003  
New Inspection Expiration Date: 03/31/2003

### CONTROL INFO

Certificate: CIF000039200308740318  
TIN: N/A  
Software Version: 3.29  
Date: 03/28/2003  
Time: 11:11:58 AM  
Inspection Type: Initial  
Sticker #: 6732766

## FINAL RESULT: FAIL

INSPECTION PERFORMED: ASM 5015 Enhanced Emissions Test and Safety

INSPECTION RESULTS: SAFETY: FAIL

EMISSIONS: PASS

This test was performed in conformance with section 207(b) of the Federal Clean Air Act.

### EMISSIONS RESULTS

GAS	STANDARD	READING	RESULT
NO <sub>x</sub>	725	174	PASS
HC	89	10	PASS
CO%	0.50	0.04	PASS
CO <sub>2</sub> %		15.1	
O <sub>2</sub> %		0.0	
RPM		0	

TEST	RESULT
Tank Pressure	N/A
Gas Cap	PASS
Purge	N/A
Tampering	PASS
Visible Smoke	PASS

### EXPLANATION

This vehicle has failed inspection.

If this vehicle is not presented within 45 days from today, it may be subjected to another complete inspection.

However this vehicle must pass inspection by 04/30/2003 at any facility, or it may be subjected to registration suspension.

It has passed emissions inspection.

It has failed inspection for the following condition(s)

Tail light fails to operate properly

Rear Lights: Failure

Stop light(s) out or missing

WIG WAG

### RETAIN THIS DOCUMENT FOR USE ON REINSPECTION.

Vehicles that fail the Emissions Inspection may be eligible for warranty coverage for the required repairs. Vehicle manufacturers are required by federal law to provide Emissions Warranties for at least eight (8) years or eighty thousand (80,000) miles. Warranty coverage may vary depending upon vehicle make and model year. For further information, refer to the Emissions Warranty section of the vehicle owner's manual.

Page 1

Inspector:

MICHAEL C. GELBKE

INL005658

VEHICLE EMISSIONS INSPECTION QUESTIONS:

For additional information, contact MVS at 1-888-NJMOTOR.

**FAIL**

KNAFB121435213294

2003 KIA SPE

CIF000039200308740318



**THE ATTACHMENTS TO THIS  
DOCUMENT HAVE BEEN REMOVED  
TO PROTECT UNWARRANTED  
INVASION OF PERSONAL PRIVACY  
PURSUANT TO EXEMPTION 6 OF  
THE FREEDOM OF INFORMATION  
ACT (FOIA), 5 U.S.C. 552(b)(6).**