Moisten Here Moisten Here Moisten Here

10027260

Form Approved: O.M.B. No. 2127-0008

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

Use a No. 2 pencil or blue or black ink pen only.
CORRECT MARK: ●

FOR AGENCY USE ONLY
Date Received
Od-or ___ rb-dt ___ od-rt ___ up-fr ___

OWNER INFORMATION (Type or Print)

NAME: [redacted]
STREET NO.: [redacted] APT. NO.
CITY: Front Royal, VA STATE: [redacted]
ENTER ZIP CODE → ZIP CODE + 4: [redacted]
DAYTIME TELEPHONE NUMBER — AREA CODE: [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 and address to the vehicle manufacturer.
SIGNATURE OF OWNER: [redacted] DATE: 6/24/03

VEHICLE INFORMATION

VEHICLE IDENT. NO. (VIN) (located at bottom of windshield on driver's side)	VEHICLE MAKE	VEHICLE MODEL	MANUFACTURE DATE	MODEL YEAR
KNDJA723715095078	KIA	Sportage		2001

VEHICLE MANUFACTURER: ○ BMW ○ Daimler/Chrysler ○ Ford ○ General Motors ○ Honda ○ Hyundai ○ Nissan ○ Saab ○ Subaru ○ Toyota ○ Volvo ○ VW ○ Other ______

PURCHASE DATE		DEALER'S NAME	CITY	STATE	ZIP CODE
10/6/01	● New ○ Used	Parson's	Winchester	VA	22601

ENGINE SIZE (CID/CC/L) ___ NO. CYLINDERS 4
FUEL SYSTEM: ○ Turbo ● Fuel Injection
FUEL TYPE: ○ Diesel ● Gas
TRANSMISSION TYPE: ○ Manual ● Automatic
ANTILOCK BRAKES: ● Yes ○ No
RESTRAINT SYSTEM: ● Driverside Airbag ○ Passengerside Airbag ○ 3-Point Belt ○ 2-Point Belt ○ Motorbelt
CRUISE CONTROL: ○ Yes ● No

DRIVETRAIN: ○ Front ○ Rear ● 4-Wheel
VEHICLE TYPE: ○ Car ○ Van ○ Minivan ● Sport Utility ○ Truck ○ Motorcycle ○ Other ______
DOORS: ○ 2-Door ● 4-Door
BODY STYLE: ● Hatchback ○ Pick Up Truck ○ Sedan ○ Stationwagon

FAILED COMPONENT(S)/PART(S) INFORMATION

COMPONENT: ○ Child Seat ○ Electrical Lights & Alarms ○ Engine & Cooling System ○ Equipment ● Fuel System, Exhaust ○ Heater, Defrost, Ventilation ○ Interior ○ Parking Brake ○ Power Train ○ Service Brakes ○ Steering ○ Structure ○ Suspension ○ Visual Systems ○ Other ______

NO. OF FAILURES: 6

INCIDENT DATE: 11/6/01 11/23/01 12/7/01 2/4/03 5/20/03 6/14/03

MILEAGE AT INCIDENT:

VEHICLE SPEED AT INCIDENT: 6

FAILED PART(S): ● Original ○ Replacement

To report defective or failed tires provide the following: Tire Brand, Tire Name, Tire Size (include all number and letters).

TIRE NAME — COMPLETE TIRE SIZE

TIRE BRAND: ○ BF Goodrich ○ Cooper ○ Firestone ○ Goodyear ○ Kelly Springfield ○ Michelin ○ Yokohama ○ Other ______

HANDICAPPED ADAPTIVE: ○ Yes ● No
FAILED PART(S) AVAILABLE? ○ Yes ● No Had to be ordered
NHTSA PREVIOUSLY CONTACTED? ○ Yes ● No

APPLICABLE 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:

CAUSE OF INCIDENT: ○ Wear/Corroded/Rust ○ Weak/Poor Fit/Loose ○ Cut/Torn ○ Disconnect/Fell Off ○ Erratic/Poor Performance ○ Excessive Effort ○ Noisy ○ Leaks ○ Short ○ Locks/Sticks/Grabs ○ Stability/Vibration ○ Broken

RESULT OF INCIDENT: ○ Explosion/Fire ○ Loss of Control ○ Poor Visibility ○ Inadvertent Start ○ Rollover ○ Stalls ○ Sudden Acceleration