



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  
(1-888-327-4238)  
INTERNET: www.nhtsa.dot.gov/hotline

FOR AGENCY USE ONLY 1367

Date Received: 2004 JUN -6 PM 8:19  
Repository:   
Reference No.: 10078196

**OWNER INFORMATION (Type or Print)**

Name: [Redacted] Telephone Number: [Redacted] E-mail Address: [Redacted]  
Address: [Redacted]  
City: CRANSTON State: RI Zip Code: 02910

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: 6/23/04

**VEHICLE INFORMATION**

17 digit Vehicle Identification Number Located at bottom of windshield on driver's side: KMDJB7281  
Make: KIA Model: SPORTAGE Model Year: 2000  
Date Purchased: 11/1999 Dealer's Name and Telephone Number: KIA of Rehoboth 1-908-338-9799  
Original Owner:  Dealer's City: State: Zip Code: Engine: No. Cylinders: 4 Fuel Type:  
Transmission Type: MANUAL Antilock Brakes:  Cruise Control:  Powertrain: FRONT WHEEL DRIVE  
Vehicle Component Code: 105300 POWER TRAIN: DRIVELINE: DRIVESHAFT  
Multiple Failure: 3

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

Incident Date(s): 11-APR-2002 + 25-MARCH-2003 + 10-JUNE-2004 Failure Mileage: 28440 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: DOTM18ABCD035) 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).

WHILE DRIVING DRIVESHAFT MADE A LOUD NOISE AND BROKE. WHEN THIS OCCURRED CONSUMER PULLED OVER AND CALLED A TOWING COMPANY. DEALERSHIP REPLACED THE DRIVESHAFT, BUT THE FAILURE RECURRED TWICE. \*AK

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

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

I have had my drive shaft replaced 3X in 3 years  
(Notes a fault)  
I have enclosed copies of the receipts.

My SUV will make a rattling noise, then it will  
rattle into a louder noise, then too bad to  
drive. (3X)

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 \$200



NO POSTAGE  
NECESSARY  
IF MAILED  
IN THE  
UNITED STATES

**BUSINESS REPLY MAIL**

FIRST CLASS PERMIT NO 73173 WASHINGTON, DC

POSTAGE WILL BE PAID BY MAIL. 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**

**1-888-327-4238**

DOT Auto Safety Hotline  
(DASH) & DOT



U.S. Department of Transportation  
National Highway Traffic Safety  
Administration  
<http://www.safercar.gov>

**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).**