



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
(1-888-327-4236)
INTERNET: www.nhtsa.dot.gov/hotline

FOR AGENCY USE ONLY 100148

Date Received: 28-JUN-2005
Repository:
Reference No.: 10126786

OWNER INFORMATION (Type or Print)

Name: [REDACTED] Daytime Telephone Number: [REDACTED] E-mail Address: [REDACTED]
Address: [REDACTED] Evening Telephone Number: [REDACTED]
City: HINGDALE State: MA Zip 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 your name or address to the vehicle manufacturer.
Signature of Owner: [REDACTED] Date: 7/25/05

VEHICLE INFORMATION

17 digit Vehicle Identification Number Located at bottom of windshield on driver's side: KMHC645C01 [REDACTED]
Make: HYUNDAI Model: ACCENT Model Year: 2001
Date Purchased: 05-MAY-03 Dealer's Name and Telephone Number: HADDAD 1-413-485-4335
Original Owner: State: MA Zip Code: 01201 Engine: No. Cylinders: 4 Fuel Type: Diesel-GAS
Transmission Type: AUTOMATIC Antilock Brakes: Cruise Control: Powertrain: FRONT WHEEL DRIVE
Vehicle Component Code: 103000 POWER TRAIN: AUTOMATIC TRANSMISSION
Multiple Failure: 1

FAILED COMPONENT(S)/PART(S) INFORMATION

Incident Date(s): 13-JUN-2005 Failure Mileage: 49800 Failure Speed: VARIED TRANSMISSION

ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A TIRE FAILURE

Tire Make: [REDACTED] Tire Model (Name or Number): [REDACTED] Tire Size (Example P215/65R15): [REDACTED]
DOT No. (Example: DOTM14ABC038): [REDACTED] Original Equipment Prior Repair: Failure Location: [REDACTED]
Tire Component Code: [REDACTED] Tire Failure Type: [REDACTED]

ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A CHILD SEAT FAILURE

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

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: [REDACTED] Number of Deaths: [REDACTED] 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).

DT: CONTACT STATES HIS CAR WAS LUNGING FORWARD TOWARD THE WINDSHIELD. HE TOOK VEHICLE TO THE DEALER, AND THEY SAID HE WOULD HAVE TO DRIVE IT UNTIL IT BLEW UP, TRANSMISSION FAILURE. DEALER REFUSED TO REPLACE TRANSMISSION DUE TO WARRANTY COVERAGE. THEY HAD THE CAR WITH 29,000 MILES AT THE POINT WHERE THEY WERE SAYING THE OIL SHOULD HAVE BEEN CHANGED, AND DID NOT CHANGE THE OIL, EVEN THOUGH CONTACT HAD RECORDS INDICATING IT HAS BEEN CHANGED EVERY 3,000 MILES. CONTACT FELT DEALER WAS NEGLIGENT BY NOT ACKNOWLEDGING THERE WAS A PROBLEM AT THE BEGINNING. *AK

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.

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

The car was brought to the dealer at 23560 with
transmission problem as stated.
Do NOT recommend or suggest transmission fluid change
knowing it was due.
Call Dealer several more times they said they
could do nothing till the tranny failed

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, 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
OR

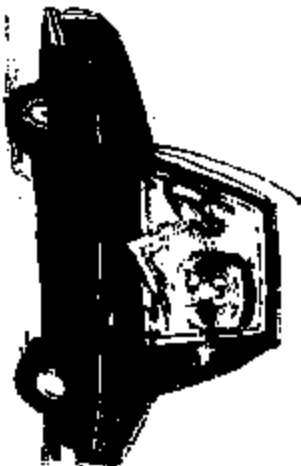
DASH2DOT

and dial toll free at

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(DASH) 2 DOT



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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).