



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

Repository

12-OCT-2006

Reference No.
10170634

OWNER INFORMATION (Type or Print)

Name [REDACTED]

Daytime Telephone Number [REDACTED]

E-mail Address [REDACTED]

Address [REDACTED]

City SHIPPENVILLE

State PA

Zip Code [REDACTED]

Evening Telephone Number [REDACTED]

Do you authorize NHTSA to contact the manufacturer of your vehicle? YES NO
 In the absence of a signature or address to the vehicle manufacturer.
 Signature of Owner [REDACTED] Date 12/13/06

VEHICLE INFORMATION

17 digit Vehicle Identification Number Located at bottom of windshield on driver's side
5NPEU46F76H [REDACTED]

Make HYUNDAI

Model SONATA

Model Year 2006

Date Purchased 19-JUL-06

Dealer's Name and Telephone Number MIKE KELLY HYUNDAI 724 287-2701

Engine: No: Cylinders 6

Fuel Type: Gas

Original Owner

Dealer's City BUTLER

State PA

Zip Code 16002

Transmission Type Antilock Brakes
AUTOMATIC Cruise Control

Powertrain FRONT WHEEL DRIVE

Vehicle Component Code 141100 AIR BAGS:FRONTAL:SENSOR/CONTROL MODULE

Multiple Failure: 1

FAILED COMPONENT(S)/PART(S) INFORMATION

Incident Date(s) 12-OCT-2006

Failure Mileage 4500

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: DOTM9ABC036)

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

File

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).

DT*: THE CONTACT STATED WHILE DRIVING VARIOUS SPEEDS, THE FRONT PASSENGER SIDE AIRBAG LIGHT INTERMITTENTLY ILLUMINATED INDICATING IT WAS INOPERATIVE ALTHOUGH A PASSENGER WAS SEATED WITH THE SEAT BELT ENGAGED. THE VEHICLE WAS INSPECTED BY A DEALER WHO WAS UNABLE TO DUPLICATE THE PROBLEM. THE PROBLEM PERSISTED AND THE VEHICLE WAS RETURNED TO THE DEALER FOR FURTHER INSPECTION WHO DETERMINED THE AIRBAG SENSOR NEEDED TO BE REPLACED. THE MANUFACTURER WAS ALERTED.

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 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)

DEALER REPLACED SEAT BOTTOM; HOWEVER PROBLEM STILL EXISTS. PASSENGER OCCUPANT WEIGHS 135 LBS AND SEAT SHOULD RESPOND TO 180 LB. PASSENGER.

WE CONTACTED HYUNDAI AND DEALER. NEITHER IS SURE HOW TO PROCEED.

MY WIFE FEELS UNSAFE RIDING IN PASSENGER SEAT.

YOUR ASSISTANCE WOULD BE GREATLY APPRECIATED.

THANK YOU.

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

ERIE PA 165

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HAPPY HOLIDAYS

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-210 400 7th Street, SW Washington, DC 20590



Think your vehicle has a safety defect?



If so:

Use the enclosed form to file a report.

or visit:

www.safercar.gov

or call:

Vehicle Safety Hotline 888-327-4236



Vehicle Owner's Questionnaire (VOQ) U.S. Department of Transportation National Highway Traffic Safety Administration



