



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
 10-JAN-2007 9:40

Repository

Reference No.
 10178328

OWNER INFORMATION (Type or Print)

Name
 Address
 City FLORENCE State MS Zip Code

Daytime Telephone Number
 Evening Telephone Number

E-mail Address

Signature of Owner _____ Date 1/19/07

VEHICLE INFORMATION

17 digit Vehicle Identification Number Located at bottom of windshield on driver's side
 KIA OPTIMA 2004

Date Purchased 15-DEC-04 Dealer's Name and Telephone Number WILSON KIA DODGE 6019144200 Engine: No: Cylinders 4 Fuel Type: Gas

Original Owner Dealer's City SLOWOOD State MS Zip Code

Transmission Type AUTOMATIC Antilock Brakes Cruise Control Powertrain REAR WHEEL DRIVE Vehicle Component Code 141100 AIR BAGS:FRONTAL:SENSOR/CONTROL MODULE Multiple Failure: 2

FAILED COMPONENT(S)/PART(S) INFORMATION

Incident Date(s) 09-JAN-2007 Failure Mileage 44143 Failure Speed 0

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 0 Number of Deaths 0 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).

TL* - THE CONTACT OWNS A 2004 KIA OPTIMA. THE CONTACT WAS ADVISED BY THE SERVICE DEPARTMENT THAT THE AIR BAG SENSOR WAS DEFECTIVE AND NEEDED TO BE REPLACED. THE DEALER, WHERE THE CONTACT PURCHASED THE VEHICLE REPAIRED THE AIR BAG SENSOR ON TWO OCCASIONS, BUT THE FAILURE RECCURED. THE CONTACT INDICATED THAT THE SENSOR WAS SUPPOSE TO DETECT A WEIGHT 90 POUNDS OR ABOVE. *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 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.