 DOT Auto Safety Hotline Vehicle Owner's Questionnaire Report Vehicle Safety Defects 1-888-DASH-2-DOT (1-888-327-4236) INTERNET:www.nhtsa.dot.gov/hotline				FOR AGENCY USE ONLY 100148	
U.S. Department of Transportation National Highway Traffic Safety Administration 2008 NOV 25 PM 4:10				Date Received	Repository <input type="checkbox"/>
				06-NOV-2008	Reference No. 10247823
OWNER INFORMATION (Type or Print)					
Name			Daytime Telephone Number		E-mail Address
Address			Evening Telephone Number		
City	State	Zip Code			
PEMBORKE PINES	FL				
Do you authorize NHTSA to provide a copy of this report to the manufacturer of your vehicle? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO					
In the absence of an authorization, NHTSA WILL NOT provide your name or address to the vehicle manufacturer.					
Signature of Owner _____ Date ____/____/____					
VEHICLE INFORMATION					
17 digit Vehicle Identification Number Located at bottom of windshield on driver's side			Make	Model	Model Year
5NPET46C58H			HYUNDAI	SONATA	2008
Date Purchased	Dealer's Name and Telephone Number		Engine:	Fuel Type:	
3/28/08	William Lehman Buick		No: Cylinders	REG	
Original Owner <input type="checkbox"/>	Dealer's City	State	Zip Code		
			4		
Transmission Type	<input checked="" type="checkbox"/> Antilock Brakes	Powertrain	Multiple Failure:	Incident Date(s)	
AUTO	<input checked="" type="checkbox"/> Cruise Control			12-MAY-2008	
FAILED COMPONENT(S)/PART(S) INFORMATION					
Vehicle Component Code: 141000 AIR BAGS: FRONTAL				Failure Mileage	Failure Speed
					20
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)		<input type="checkbox"/> Original Equipment	Failure Location:		
		<input type="checkbox"/> Prior Repair			
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	Fire	Number of Persons Injured	Number of Deaths	Reported to Police	
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	0	0	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 2008 HYUNDAI SONATA. WHILE DRIVING APPROXIMATELY 20 MPH ON NORMAL ROAD CONDITIONS, THE AIR BAG WARNING INDICATOR ILLUMINATED ON THE INSTRUMENT PANEL INTERMITTENTLY. THE VEHICLE WAS TAKEN TO AN AUTHORIZED DEALER AND THEY STATED THAT THE FAILURE WAS RELATED TO THE FRONTAL PASSENGER AIR BAG SENSOR. THROUGH RESEARCH, THE TECHNICIAN DISCOVERED NHTSA CAMPAIGN ID NUMBER 08V161000 (AIR BAGS). THE VEHICLE WAS REPAIRED FOR THE RECALL DEFECT; HOWEVER, THE REMEDY DID NOT PROPERLY CORRECT THE SAFETY DEFECT. THE CONTACT WAS CONCERNED OF THE SAFETY RISK INVOLVED. THE VIN AND FAILURE MILEAGE WERE UNKNOWN. THE CURRENT MILEAGE WAS 7,655.					
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)

Additional Comments: - My wife weighs approx 120 lbs. Many times when she gets in the passenger seat, the seat air bag light stays on, indicating that the air bag will not deploy in an accident. She has to get out of the car and sit back down on the seat. Sometimes she has to repeat this in order for the light to go out. I can not drive this car with my wife knowing that this is a major safety problem.

Enclosed are some of the repairs for this problem that have not been ~~successful~~ successful.

ATTACH ADDITIONAL SHEETS IF NECESSARY

U.S. Department of Transportation

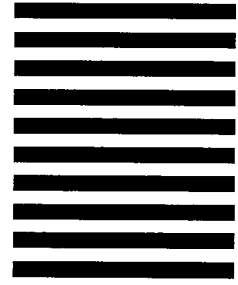
National Highway Traffic Safety Administration

1200 New Jersey Avenue SE. Washington, D.C. 20077-9382

Official Business Penalty for Private Use \$300



NO POSTAGE NECESSARY IF MAILED IN THE UNITED STATES



BUSINESS REPLY MAIL
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POSTAGE WILL BE PAID BY ADDRESSEE

**U.S. Department of Transportation
National Highway Traffic Safety Administration
Office of Defects Investigation, NVS-210
1200 New Jersey Avenue SE.
Washington, D.C. 20077-9382**



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

276487

522371



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INVOICE

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SUBARU
SUZUKI



ISUZU

SAAB
HYUNDAI

www.lehmanautoworld.com

PEMBROKE PINES, FL
HOME: () US:

SERVICE ADVISOR: 1738 ALAN R VALDEZ

COLOR	YEAR	MAKE/MODEL	VIN	LICENSE	MILEAGE IN / OUT	TAG
BLUE	08	HYUNDAI SONATA	5NPET46C58H		5346/5346	
DEL. DATE	PROD. DATE	WARR. EXP.	PROMISED	PO No.	RATE	PAYMENT
07AUG07 IS			WAIT 12MAY08		0.00	CASH
INV. DATE						12MAY08
R.O. OPENED	READY	OPTIONS: STK:H80042 DLR: ENG:2.4_Liter		TRN:AUTO		
12MAY08	12MAY08					

LINE	OPCODE	TECH	TYPE	HOURS	LIST	NET	TOTAL
A CUSTOMER STATES PASSENGER SEAT BELT SCREEN SCRATCHED/FADED--SOP IN CAUSE: E							
	95930R00		SENSOR ASSY-FRONT DUAL AIR BAG (LH) RE				
			2334 GARRIDO, YAIR LIC#: 6537				
			WH94 0.30				(N/C)
	1	95930-3K500	S/BELT REM				(N/C)
FC: PART#: COUNT:							
CLAIM TYPE:							
AUTH CODE:							

5346 BLEMISH ON COVER 95930R00 2334 .3 REPLACE PASS SEAT BELT WARNING SENSOR							

B CUSTOMER STATES PASSENGER AIR BAG OFF LIGHT COMES ON AT TIMES WHILE DRIVING WITH PASSENGER IN SEAT.							
CAUSE: E							
	148	NO CHARGE					
		99 WH94	0.00				(N/C)
FC: PART#: COUNT:							
CLAIM TYPE:							
AUTH CODE:							

5346 99 N/C (ASM) RESECHEDULE FOR FUTHER DIAGNOSIS

IMPORTANT
You may receive a customer satisfaction survey from Your Manufacturer in the next few weeks. If for any reason you cannot grade us (Completely Satisfied) please contact the service manager at Lehman Auto World immediately. Your satisfaction is our No. 1 concern.
THANK YOU
(305) 654-6240

NOTE: MISC CHARGES-THIS CHARGE REPRESENTS COSTS AND PROFITS TO THE MOTOR VEHICLE REPAIR FACILITY FOR ITEMS SUCH AS MISCELLANEOUS SHOP SUPPLIES AND/OR WASTE DISPOSAL
THANK YOU FOR ALLOWING US TO SERVE YOU!
VISIT OUR WEBSITE: WWW.LEHMANAUTOWORLD.COM

LIMITED WARRANTY: The [] to this part(s) installed in accordance with [] use that may be offered by the manufacturer. The [] dealer hereby expressly disclaims all warranties, either express or implied, including any implied warranties of merchantability or fitness for a particular purpose, and neither assumes nor authorizes any other person to assume for it any liability in connection with the sale of products or service sold under the terms of this estimate. Parts and labor are guaranteed for 12 months or 12,000 miles, whichever comes first. As other repairs are guaranteed for 90 days or 4,000 miles, whichever comes first. Seller does not guarantee that work performed in accordance with this estimate will correct any problem specified on the description of the complaint.

DESCRIPTION	TOTALS
LABOR AMOUNT	0.00
PARTS AMOUNT	0.00
GAS, OIL, LUBE	0.00
SUBLET AMOUNT	0.00
MISC. CHARGES	0.00
TOTAL CHARGES	0.00
LESS INSURANCE	0.00
SALES TAX	0.00
PLEASE PAY THIS AMOUNT	0.00

"I UNDERSTAND THAT ALL PARTS ACCESSORIES SOLD OR USED ARE SUBJECT TO THE FEDERAL MAGNUSON-MOSS ACT AND THE CONSUMER MERCHANDISE PURCHASED IS UNDER LIMITED WARRANTY BY THE MANUFACTURER AND THE WRITTEN TERMS AND CONDITIONS THEREOF ARE AVAILABLE FOR INSPECTION."
CUSTOMER HEREBY ACKNOWLEDGES RECEIPT OF ABOVE MENTIONED VEHICLE, AND RECEIPT OF INVOICE COPY HEREOF.
CUSTOMER SIGNATURE

774334

119011

RICK CASE HYUNDAI

WORLD'S LARGEST DEALER

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Davie, FL 33337
954-377-4100

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INVOICE

PAGE 1

BUS:

SERVICE ADVISOR: 2207 ERNEST BYNES

COLOR	YEAR	MAKE/MODEL	VIN	LICENSE	MILEAGE IN / OUT	TAG	
BLUE	08	HYUNDAI SONATA	5NPET46C58H		6292/6294		
DEL DATE	PROD DATE	WARR EXP	PROMISED	PO NO	RATE	PAYMENT	INV DATE
23SEP08 IS			17:00 29SEP08		0.00	CASH	02OCT08
R.O OPENED	READY	OPTIONS: DLR:					
10:09 29SEP08	08:03 02OCT08						

LINE OPCODE TECH TYPE HOURS LIST NET TOTAL
 A EVALUATION, SEAT CUSHION REMOVED, PACKAGED, SHIPPED, UNPACKAGED, AND REINSTALLED.

CAUSE: COMPLETE RECALL
 81B012R0 EVALUATION, SEAT CUSHION REMOVED, PACKAGED, SHIPPED, UNPACKAGED, AND REINSTALLED.
 5562 ZAPATA, ALEJANDRO LIC#: 0377
 W (N/C)
 FC: PART#: COUNT:
 CLAIM TYPE: CPN
 AUTH CODE:

6292 SHIPPED FOR EVALUATION SEAT CUSHION AS BULLETIN 08-01-006.

B FREIGHT TO BILL HYUNDAI DIRECT FOR SEAT CALIBRATION
 CAUSE: FREIGHT
 FREIGHT FREIGHT TO BILL HYUNDAI DIRECT FOR SEAT CALIBRATION
 5562 ZAPATA, ALEJANDRO LIC#: 0377
 W (N/C)
 1 FREIGHT FREIGHT CHARGE (N/C)
 FC: PART#: COUNT:
 CLAIM TYPE:
 AUTH CODE:

6293 OK..

C WARRANTY/MAINTENANCE LOANER CAR
 CAUSE: LOANER
 LOANER WARRANTY/MAINTENANCE LOANER CAR
 5562 ZAPATA, ALEJANDRO LIC#: 0377
 W (N/C)
 FC: PART#: COUNT:
 CLAIM TYPE:

ON BEHALF OF SERVICING DEALER, I HEREBY CERTIFY THAT THE INFORMATION CONTAINED HEREON IS ACCURATE UNLESS OTHERWISE SHOWN. SERVICES DESCRIBED WERE PERFORMED AT NO CHARGE TO OWNER. THERE WAS NO INDICATION FROM THE APPEARANCE OF THE VEHICLE OR OTHERWISE, THAT ANY PART REPAIRED OR REPLACED UNDER THIS CLAIM HAD BEEN CONNECTED IN ANY WAY WITH ANY ACCIDENT, NEGLIGENCE OR MISUSE. RECORDS SUPPORTING THIS CLAIM ARE AVAILABLE FOR (1) YEAR FROM THE DATE OF PAYMENT NOTIFICATION AT THE SERVICING DEALER FOR INSPECTION BY MANUFACTURER'S REPRESENTATIVE.

STATEMENT OF DISCLAIMER
 The factory warranty constitutes all of the warranties with respect to the sale of this item/items. The Seller hereby expressly disclaims all warranties either express or implied, including any implied warranty of merchantability or fitness for a particular purpose. Seller neither assumes nor authorizes any other person to assume for it any liability in connection with the sale of this item/items.

DESCRIPTION	TOTALS
LABOR AMOUNT	
PARTS AMOUNT	
GAS, OIL, LUBE	
SUBLET AMOUNT	
MISC. CHARGES	
TOTAL CHARGES	
LESS INSURANCE	
SALES TAX	
PLEASE PAY THIS AMOUNT	

(SIGNED) DEALER, GENERAL MANAGER OR AUTHORIZED PERSON (DATE)

CUSTOMER SIGNATURE