

INFORMATION ACT (FOIA), 5 U.S.C. 552(b)(6)

U.S. Department
of TransportationNational 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

FEB 17 2011

22-DEC-2010

Repository ☐Reference No.
10372046**OWNER INFORMATION (Type or Print)**

Name

Address

City WALTON HILLS

State OH

Zip Code

Daytime Telephone Number

E-mail Address

Evening Telephone Number

The information you provide will be used to identify potential safety-related defects. We may share your information with the applicable vehicle manufacturer during an investigation or recall in accordance with the routine uses described in the agency's Privacy Act notice. See 49 FR 53971 (Sep. 3, 2004).

VEHICLE INFORMATION

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

Make
KIAModel
OPTIMAModel Year
2004

Date Purchased

Dealer's Name and Telephone Number

Engine:

Fuel Type:

Original Owner

Dealer's City

State

Zip Code

No: Cylinders 6

GAS

Transmission Type

☒ Antilock Brakes

Powertrain

Multiple Failure:

Incident Date(s)

22-NOV-2010

☐ Cruise Control**FAILED COMPONENT(S)/PART(S) INFORMATION**

Vehicle Component Code: 170000 LATCHES/LOCKS/LINKAGES

Failure Mileage

Failure Speed

95000

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

Fire

Number of Persons Injured

Number of Deaths

Reported to Police

N

☐ Yes ☒ No☐ Yes ☒ No

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 VEHICLE WAS PARKED AND LOCKED WHEN THE CONTACT ATTEMPTED TO EXIT THROUGH THE DRIVERS SIDE DOOR BUT THE DOOR WOULD NOT OPEN. IN ORDER TO EXIT THE VEHICLE, THE CONTACT WAS FORCED TO CLIMB OVER THE CENTER CONSOLE TO EXIT THROUGH THE FRONT PASSENGER SIDE DOOR. THE FAILURE WOULD RECUR WHENEVER THE VEHICLE WAS LOCKED. THE FAILURE ALSO INTERMITTENTLY OCCURRED WHEN TRYING TO ENTER THE LOCKED VEHICLE FROM THE FRONT DRIVER SIDE DOOR. THE VEHICLE WAS NOT TAKEN TO HAVE THE FAILURE DIAGNOSED AND WAS NOT REPAIRED. THE VIN WAS UNAVAILABLE. THE FAILURE AND CURRENT MILEAGE WAS UNKNOWN.

NOW IT HAPPENS ALWAYS. CANNOT LOCK VEHICLE. IF DRIVERS DOOR IS LEFT UNLOCKED ALL DOORS ARE UNLOCKED WHICH IS UNSAFE FOR CHILDREN IN REAR ~~AND ADULTS~~

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.