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: JUN 1 5 2011 — 02-MAY-2011

Repository ☐

Reference No. 10398622

OWNER INFORMATION (Type or Print)

Name [redacted]

Address [redacted]

City JENNERS | State PA | Zip Code [redacted]

Daytime Telephone Number [redacted]

Evening Telephone Number

E-mail Address

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	Model	Model Year
KMHCG45G7YU[redacted]	HYUNDAI	ACCENT	2000

Date Purchased	Dealer's Name and Telephone Number			Engine:	Fuel Type:
7/3/09	Private owner Related To me			No: Cylinders	
Original Owner ☐	Dealer's City: New York / Long Island	State: NY	Zip Code	4	Unleaded Gas 87

Transmission Type			Multiple Failure:	Incident Date(s)
Automatic with Overdrive	☐ Antilock Brakes ☐ Cruise Control	Powertrain	the vehicle only has done this 1 time	30-APR-2011

FAILED COMPONENT(S)/PART(S) INFORMATION

Vehicle Component Code: 110000 ELECTRICAL SYSTEM	Failure Mileage	Failure Speed
	76126	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: DOTMAL9ABC036)	☐ 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
☐ Yes ☒ No	☐ Yes ☒ No			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 2000 HYUNDAI ACCENT. THE CONTACT STATED THAT THE VEHICLE WAS PARKED WITH THE ENGINE SHUT OFF WHEN THE ENGINE ENGAGED INDEPENDENTLY. THE CONTACT STATED THAT THE KEY WAS NOT IN THE IGNITION AT THE TIME OF THE FAILURE. THE CONTACT ENTERED THE VEHICLE AND ATTEMPTED TO ~~INSERT THE KEY INTO THE IGNITION~~ BUT TO NO AVAIL. THE CONTACT THEN DEPRESSED THE BRAKES AND WAS ABLE TO ~~SIMULTANEOUSLY INSERT THE KEY INTO THE IGNITION TO~~ SHUT THE ENGINE OFF. THE VEHICLE WAS NOT TAKEN TO THE DEALER FOR DIAGNOSTICS OR REPAIRS. THE MANUFACTURER WAS CONTACTED AND A COMPLAINT WAS FILED BUT NO OTHER ASSISTANCE WAS OFFERED. THE APPROXIMATE FAILURE MILEAGE WAS 76,126.

(1) I was able to Insert key & turn to on & off But Engine would NOT shut off.
(2) The Engine shut off when The Brake was Applied

Include, if available: Police/Fire Department Report, Photos, and Repair Invoice. ATTACH ADDITIONAL SHEETS IF NECESSARY

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

On the Date Before Which I Reported The Incident, The Family and I went To Town in our other vehical. The car was NOT Running when we Left. when we Returned I could Hear The car Running, we Had been Gone shoping for several Hours. The weather Had been Raining for several Days and there Had Been fog The Night before. I Entered the vehical & check The ignition, There was No key in it and it was in The off position. I Got my key into The Ignition and turned it to on and off several Times, The Motor would Not ~~start~~ stall. I Then Pushed on The Brake To TRY switching Gears and Then the motor Stalled. This was The only Time ATTACH ADDITIONAL SHEETS IF NECESSARY That This Has Happened.

[redacted]

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National Highway Traffic Safety Administration

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

Official Business
Penalty for Private Use $300

JOHNSTOWN PA 159
06 JUN 2011 PM 2 L

NO POSTAGE NECESSARY IF MAILED IN THE UNITED STATES

BUSINESS REPLY MAIL
FIRST-CLASS MAIL PERMIT NO. 1888 WASHINGTON, DC

POSTAGE WILL BE PAID BY ADDRESSEE

US Department of Transportation
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Office of Defects Investigation, NVS-210
1200 New Jersey Avenue SE.
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