

From: [Wells, Cynthia CTR \(NHTSA\)](#)
To: [Johnson, Lajuan CTR \(NHTSA\)](#)
Subject: FW: NHTSA: Follow up to ODI Complaint: 10483417
Date: Monday, December 03, 2012 8:59:36 AM
Attachments: [EVOQ EMAIL RESPONSE.doc](#)
[10483417.pdf](#)
[10483417 Elantra Frame repair documentation.pdf](#)

From: Williams, Maritza CTR (NHTSA) **On Behalf Of** DataQuality, DataQuality (NHTSA)
Sent: Monday, December 03, 2012 8:56 AM
To: Wells, Cynthia CTR (NHTSA)
Subject: FW: NHTSA: Follow up to ODI Complaint: 10483417

From: [REDACTED]
Sent: Sunday, December 02, 2012 10:43 PM
To: DataQuality, DataQuality (NHTSA)
Cc: [REDACTED]
Subject: FW: NHTSA: Follow up to ODI Complaint: 10483417

Thank you for the opportunity to add to the above noted complaint. As the documents sent were not editable electronically, I'll provide my comments in the body of this email.

Since contact with the NHTSA I contacted Hyundai USA and they suggested I contact the local dealer and provide supporting photos so that Laurel Hyundai, of Johnstown, PA could contact a Hyundai representative to see if repair of this corrosion could be taken care of, possibly under the front frame corrosion recall. I spoke to a gentleman named Steve at Hyundai USA and the case # is 5084637.

After contacting Hyundai of Johnstown, the service manager picked up the vehicle and after approximately a week I was informed that Hyundai would take responsibility for parts but only if I paid for the labor (est. \$450). As I had no other option I agreed to pay the labor to get the car on the road but would still like to follow up with Hyundai USA as I believe this corrosion is not normal especially as the vehicle has been garage kept since I purchased it (10 years ago), this rear crossmember was non-existent in areas due to corrosion (See attached photos), and there was a corrosion problem with the front assemblies on this vehicle under a recall campaign.

I've attached the photos and obviously the crossmember is so corroded that it is essentially not there in areas, and also separated from the vehicle. I have also included documentation of the repair and payment. Ideal resolution of this complaint would include a refund of the labor costs I incurred. At the very least, I believe NHTSA should look into this problem for potential recall due to the safety concern. Had my wife been traveling at a higher rate of speed when the failure

occurred I don't believe she could have kept it on the road. When I tried to pull it from the garage prior to its repair I stopped after a few feet as the rear end was swaying so much.

Thank you,

[REDACTED]

[REDACTED]

Johnstown, PA [REDACTED]

(Home) [REDACTED]

(Mobile) [REDACTED]

From: EVOQ@dot.gov [<mailto:EVOQ@dot.gov>]

Sent: Tuesday, November 27, 2012 1:14 PM

To: [REDACTED]

Subject: FW: NHTSA: Follow up to ODI Complaint: 10483417

Please see the attached copy of your recent complaint and instructions. Please make any necessary edits and return via email to dataquality@dot.gov or fax to (202) 366-1767. Due to the volume of complaints we receive and our limited resources, we cannot respond to every complaint.

NHTSA/Office of Defects Investigation



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

05-NOV-2012

Repository ☐Reference No.
10483417**OWNER INFORMATION (Type or Print)**

Name [REDACTED]

Address [REDACTED]

City JOHNSTOWN

State PA

Zip Code [REDACTED]

Daytime Telephone Number

[REDACTED]

E-mail Address

[REDACTED]

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

KMHDN45D31U [REDACTED]

Make

HYUNDAI

Model

ELANTRA

Model Year

2001

Date Purchased

Dealer's Name and Telephone Number

Engine:

No: Cylinders

Fuel Type:

Original Owner

☐

Dealer's City

State

Zip Code

Transmission Type

☐ Antilock Brakes

Powertrain

Multiple Failure:

Incident Date(s)

05-NOV-2012

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

Vehicle Component Code: 162000 STRUCTURE: BODY

Failure Mileage

80000

Failure Speed

35

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 2001 HYUNDAI ELANTRA. WHILE DRIVING APPROXIMATELY 35 MPH, THE CONTACT NOTICED THAT THE VEHICLE HAD BEGUN TO FISH TAIL. THE CONTACT INSPECTED THE REAR SUB FRAME AND DISCOVERED THAT THE FRAME WAS FRACTURED AND EXHIBITED EXCESSIVE CORROSION. THE VEHICLE WAS NOT TAKEN TO THE DEALER FOR DIAGNOSTIC TESTING. THE VEHICLE WAS NOT REPAIRED. THE APPROXIMATE FAILURE MILEAGE WAS 80,000.

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.



2012/11/05

LAUREL CHRYSLER JEEP
1000 EISENHOWER BLVD
JOHNSTOWN, PA 15904
PHONE (814) 266-2345

Merchant ID: 000014652088

Ref #: 0007

Sale

XXXXXXXXXX
AMEX

Entry Method: Swiped

Total:

\$ 424.00

11/30/12

16:04:06

Inv #: 132862

Appr Code: 562943

Apprvd: Online

Batch#: 000120

Customer Copy

THANK YOU
HAVE A NICE DAY!



Jeep



LAUREL

CHRYSLER / JEEP / HYUNDAI
1880 Bedford St. • Johnstown, PA 15902
CHRYSLER FIVE STAR DEALER
Phone (814) 266-2345

JOHNSTOWN, PA

SERVICE ADVISOR CARMEN MIKSIC

REPAIR ORDER WRITTEN	DATE READY	STOCK NO.	VEHICLE IDENTIFICATION	CUST. NO.	TAG NO.	P.O. NO.	INVOICE PRINTED	INVOICE NO.
13NOV12	30NOV12		KMHDN45D31U	N162862			30NOV12	132862
TIME IN	TIME READY	YEAR	MAKE & MODEL	TELEPHONE NO.	CUST. PAY LABOR RATE	DELIVERY DATE	PREPARED BY	S/A
		01	HYUNDAI ELANTRA			01JAN01	96	143
MILEAGE IN	MILEAGE OUT	LICENSE NO.						
80395	80397							

A CUSTOMER REQUESTS TO CHECK REAR CRADLE RUST CONCERN

CAUSE: C06
M PARTS

23 WH	(N/C)
4 54849-28000 BOLT	(N/C)
2 55514-29010	
BRACKET-RR STABILIZER	(N/C)
2 55513-29020 BUSH-RR	
STABILIZER	(N/C)
4 62617-2D110 BOLT	(N/C)
1 62610-2D000	
CROSSMEMBER ASSY-RR	(N/C)
1 62653-2D000 BRACKET	(N/C)
2 55220-2D000 ARM	
ASSY-RR SUSPENSION RR	
RH	(N/C)
1 62619-2D000 CUP	(N/C)
2 55210-2D000 ARM	
ASSY-RR SUSPENSION RR	
LH	(N/C)
4 33131-42000 MULT PNCS	(N/C)
4 62617-2E100 BOLT	(N/C)

M REPLACE REAR SUBFRAME AND ARMS AND



You may receive a survey from Hyundai Motor Sales concerning your experience with our service department.

If you receive a survey, **please** take a moment to complete it and mail it back to Hyundai.

In order to receive a satisfactory survey from Hyundai, we need you to answer all "10's".

We sincerely thank you for the opportunity to service your vehicle.

While in for service today, our factory trained technicians have performed a **Multi-point/Walkaround Inspection** on your vehicle; free of charge.

Please let Hyundai know that we performed a **Multi-Point/Walkaround Inspection** and that you received your copy of the report.

If for any reason you did not have this service performed please call:

Service Manager
Laurel Hyundai
(814) 266-2345

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

I hereby authorize the repair work herein set forth to be done along with the necessary material and agree that you are not responsible for loss or damage to vehicle or articles left in vehicle in case of fire, theft, or any other cause beyond your control or for any delays caused by unavailability of parts or delays in parts shipments by the supplier or transporter. I hereby grant you and/or your employees permission to operate the vehicle herein described on streets, highways or elsewhere for the purpose of testing and/or inspection. An express mechanic's lien is hereby acknowledged on above vehicle to secure the amount of repairs thereto.

I HEREBY ACKNOWLEDGE RECEIPT OF A COPY HEREOF.

X

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.

(SIGNED)

DEALER, GENERAL MANAGER OR AUTHORIZED PERSON

DATE



JOHNSTOWN, PA

LAUREL

CHRYSLER / JEEP / HYUNDAI
 1880 Bedford St. - Johnstown, PA 15902
 CHRYSLER FIVE STAR DEALER
 Phone (814) 266-2345

SERVICE ADVISOR **CARMEN MIKSIC**

REPAIR ORDER WRITTEN	DATE READY	STOCK NO.	VEHICLE IDENTIFICATION	CUST. NO.	TAG NO.	P.O. NO.	INVOICE PRINTED	INVOICE NO.
13NOV12	30NOV12		KMHDN45D31J	N162862			30NOV12	132862
TIME IN	TIME READY	YEAR	MAKE & MODEL	TELEPHONE NO.	CUST. PAY LABOR RATE	DELIVERY DATE	PREPARED BY	SIA
		01	HYUNDAI ELANTRA			01JAN01	96	143
MILEAGE IN	MILEAGE OUT	LICENSE NO.						
80395	80397							

TECH.	TYPE	HOURS	LIST/UNIT	NET/UNIT	TOTAL
ALIGNED VEHICLE					
23	CH			400.00	400.00
FC: N56 PART#: COUNT:					
CLAIM TYPE:					
AUTH CODE:					
B PERFORM VEHICLE WALK AROUND/MULTI-POINT					
INSPECTION-COMPLETE MULTI-POINT					
INSPECTION REPORT					
FREE PERFORM VEHICLE WALK					
AROUND/MULTI-POINT					
INSPECTION-COMPLETE MULTI-POINT					
INSPECTION REPORT					
23	ISP				(N/C)

** PRE-INVOICE **

DESCRIPTION	TOTALS
LABOR AMOUNT	400.00
PARTS AMOUNT	0.00
GAS,OIL, LUBE	0.00
SUBLET AMOUNT	0.00
MISC. CHARGES	0.00
TOTAL CHARGES	400.00
LESS INSURANCE	0.00
SALES TAX	24.00
PLEASE PAY THIS AMOUNT	424.00

I hereby authorize the repair work herein set forth to be done along with the necessary material and agree that you are not responsible for loss or damage to vehicle or articles left in vehicle in case of fire, theft, or any other cause beyond your control or for any delays caused by unavailability of parts or delays in parts shipments by the supplier or transporter. I hereby grant you and/or your employees permission to operate the vehicle herein described on streets, highways or elsewhere for the purpose of testing and/or inspection. An express mechanic's lien is hereby acknowledged on above vehicle to secure the amount of repairs thereto.

I HEREBY ACKNOWLEDGE RECEIPT OF A COPY HEREOF.

X

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(SIGNED)

DEALER, GENERAL MANAGER OR AUTHORIZED PERSON

DATE



2012/11/05



2012/11/05



U.S. Department
of Transportation
**National Highway
Traffic Safety
Administration**

1200 New Jersey Avenue SE
Washington, DC 20590

Dear Consumer:

NVS-216rr

As a follow-up to your report to the Vehicle Safety Hotline (VSH), we have recorded your information on the enclosed Vehicle Owner's Questionnaire (VOQ) form. Please review the form and make changes, additions and corrections as necessary. Additionally, please provide a more detailed description of the failures(s) you reported that you believe relevant to safety. Also, if available, include copies of repair invoices, letters to the manufacturer, or any other document related to the problem(s) you reported. If a crash or fire occurred, include a copy of the police or fire department report.

It is helpful to be as thorough as possible in your report so that our ability to use your report will be maximized. If you do not have the information, it is not necessary to complete all the boxes. However, it is very difficult to identify the scope of a vehicle problem unless the vehicle identification number (VIN) is known. The VIN is located inside the vehicle on the dashboard adjacent to the left (driver's side) of the windshield pillar and on the drivers' door or the driver's door jam. It may also be listed on a dealer repair invoice or your insurance or registration cards. When reporting a tire problem, the brand name, tire line and complete tire size should be included. Be certain to provide the DOT tire identification number. It is usually located near the rim flange of the tire on either side of the tire.

We do not make your personal information (name, address, phone numbers, etc.) available to the general public. However, if we open an investigation that involves your vehicle, we will provide the manufacturer of your vehicle with a complete copy of your report. The information you provide may assist the manufacturer and NHTSA in determining if a safety-related defect exists.

Any information provided is entirely voluntary. There is no consequence or penalty of any kind if you do not wish to provide it. We seek this information to develop both statistical and investigative evidence that will help identify potential safety related problems in vehicles or vehicle equipment, e.g., tires, child safety seats, jacks, etc.

When completed, please fold and staple or tape the form so that the pre-addressed portion of the form is on the outside. If a larger envelope is used, tape the VOQ form to the larger envelope so that the pre-addressed portion of the form is showing.

If further assistance is needed, please contact the VSH at their toll-free number, 1-888-327-4236.

Thank you for your cooperation.

Sincerely,

Randy Reid Chief
Correspondence Research Division
Office of Defects Investigation
Enforcement

Enclosure: VOQ

