



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  
**FEB 28 2013**

Repository

02-JAN-2013

Reference No.  
10490755

**OWNER INFORMATION (Type or Print)**

Name  [Redacted]  
Address  [Redacted]  
City TOMS RIVER State NJ Zip Code  [Redacted]

Daytime Telephone Number  [Redacted] 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: KNAFU4A23C  [Redacted] Make KIA Model FORTE Model Year 2012  
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) 15-DEC-2012  
 Cruise Control

**FAILED COMPONENT(S)/PART(S) INFORMATION**

Vehicle Component Codes: VISIBILITY/WIPER (PWS), 162000 STRUCTURE: BODY Failure Mileage 150 Failure Speed

**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 Failure Location:  
 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).)*

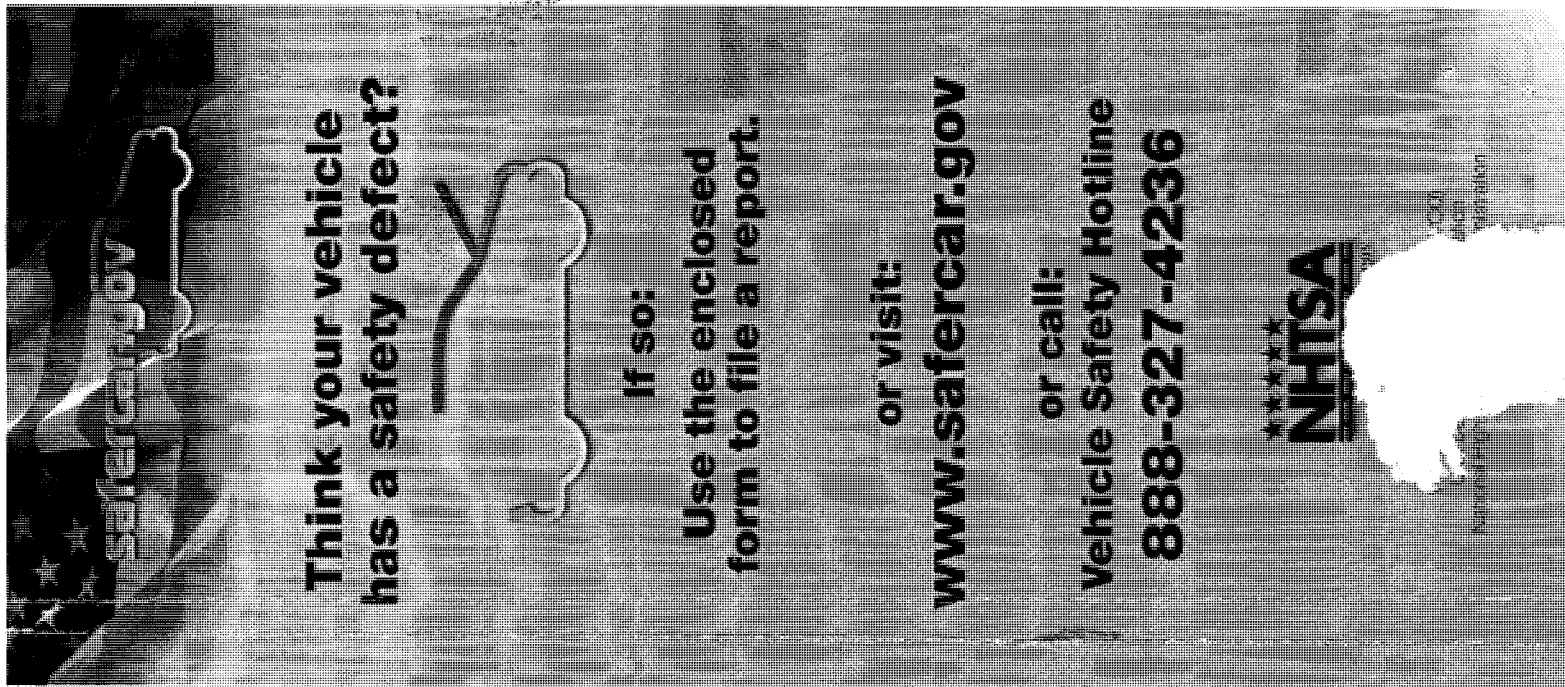
Crash  Yes  No Fire  Yes  No Number of Persons Injured 0 Number of Deaths 0 Reported to Police N

**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 2012 KIA FORTE. THE CONTACT NOTICED CONDENSATION UNDER THE FRONT DRIVER'S SIDE FLOOR MAT. IN ADDITION, THERE WAS AN ACCUMULATION OF WATER ON THE FRONT DRIVER'S SIDE FLOOR AREA. THE VEHICLE WAS TAKEN TO AN AUTHORIZED DEALER TWO TIMES FOR THE PROBLEM. THE TECHNICIAN WAS UNABLE TO DETERMINE THE CAUSE OF THE FAILURE. THE VEHICLE WAS SCHEDULED FOR DIAGNOSIS BY A WATER SPECIALIST. THE MANUFACTURER WAS NOT NOTIFIED OF THE DEFECT. THE APPROXIMATE FAILURE MILEAGE WAS 150.

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

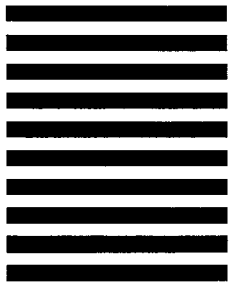
The Privacy Act of 1974-Public Law 93-579 This information is requested pursuant to authority vested in the National Highway Traffic Safety Act and subsequent amendments. You are under no obligation to respond this questionnaire. Your response may be used to assist the NHTSA in determining whether a 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.



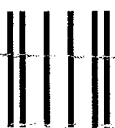
US Department of Transportation  
 National Highway Traffic Safety Administration  
 Office of Defects Investigation, NVS-210  
 1200 New Jersey Avenue SE,  
 Washington, D.C. 20077-9382

POSTAGE WILL BE PAID BY ADDRESSEE

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NO POSTAGE  
 NECESSARY  
 IF MAILED  
 IN THE  
 UNITED STATES



US 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

ATTACH ADDITIONAL SHEETS IF NECESSARY

A C/S WATER LEAK DRIVERS FLOOR  
 CAUSE - REPAIRED SEAM - 99D1KTKK SEAL COWL BODY SEAM  
 FC 999 PART # [unclear]  
 Reported LEAK 12-15-12 KEPT LOG EVERYDAY THRU 1-8-13  
 DRIVERS FLOOR SOAKING WET EVERYDAY - PICK UP CAR AFTER  
 REPAIR WORK - HAVE BEEN CHECK FLOOR EVERY DAY SINCE REPAIR  
 WORK - PAPER TOWELS UNDER MAT - FLOOR HAS BEEN DRY SINCE  
 JAN 11-13 WILL CONTINUE TO CHECK FLOOR EVERYDAY & PAPER TOWELS

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

CUSTOMER #: 101296

302496



\*INVOICE\*

TomsRiverKia.com

Ph: (732) 281-0000

Fax: (732) 281-150

PAGE 1

810 Rt. 37 West

Toms River, NJ 08753

LAVALLETTE, NJ

HOME: [REDACTED] CONT: [REDACTED]

BUS: [REDACTED] CELL: [REDACTED]

SERVICE ADVISOR: 8004 Robert Bauer

COLOR	YEAR	MAKE/MODEL	VIN	LICENSE	MILEAGE IN / OUT	TAG	
EBONY BLAC	12	KIA FORTE	KNAFU4A23C5 [REDACTED]		212/212	T594	
DEL. DATE	PROD. DATE	WARR. EXP.	PROMISED	PO NO.	RATE	PAYMENT	INV. DATE
26NOV12 IS			17:00 15JAN13			CASH	11JAN13
26NOV12 DD							
R.O. OPENED	READY	OPTIONS: SOLD-STK: [REDACTED]		ENG:2.0_Liter_DOHC_MPI			
09:55 27DEC12	13:40 11JAN13						

LINE OPCODE TECH TYPE HOURS LIST NET TOTAL

A C/S WATER LEAK DRIVERS FLOOR

CAUSE: REPAIRD SEAM

9901XTXX SEAL COWL BODY SEAM

999 W 0.00

(N/C)

FC: 999 PART#: COUNT:

CLAIM TYPE:

AUTH CODE:

SUBL RESEAL COWL TO BODY

W

(N/C)

PARTS: 0.00 LABOR: 0.00 OTHER: 0.00 TOTAL LINE A: 0.00

\*\*\*\*\*

B\*\* CLEAN ANDY AND DEODORIZE VEH

MISC MISCELLANEOUS

999 ISP 0.00

(N/C)

PARTS: 0.00 LABOR: 0.00 OTHER: 0.00 TOTAL LINE B: 0.00

\*\*\*\*\*



KIA MOTORS

SERVICE DEPARTMENT DISCLAIMER

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 the vehicle in case of fire, theft or any other cause beyond your control. I also understand and agree that you are not responsible for any delays caused by unavailability of parts or scheduling. I hereby grant permission to operate said vehicle on streets, highways or elsewhere for the purpose of testing or inspection. An express mechanic's lien is hereby acknowledged on above vehicle to secure the amount of repairs here to.

CUSTOMERS SIGNATURE

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