

 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 OCT 24 2013		Repository <input type="checkbox"/>	
		05-SEP-2013		Reference No. 10541982	
OWNER INFORMATION (Type or Print)					
Name		Address		Daytime Telephone Number	
City		State		Evening Telephone Number	
WESTERVILLE		OH			
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	
5NPEU46C36H		HYUNDAI		SONATA	
				Model Year	
				2006	
Date Purchased		Dealer's Name and Telephone Number		Engine:	
09-10-2006		Cocoa Hyundai 321-631-2444		No: Cylinders	
Original Owner		Dealer's City		Fuel Type:	
<input checked="" type="checkbox"/>		Cocoa		regular	
		State		4	
		FL		unleaded	
		Zip Code			
		32922			
Transmission Type		<input checked="" type="checkbox"/> Antilock Brakes		Multiple Failure:	
Automatic		<input checked="" type="checkbox"/> Cruise Control		Powertrain	
				Incident Date(s)	
				29-MAY-2007	
FAILED COMPONENT(S)/PART(S) INFORMATION					
Vehicle Component Code: 140000 AIR BAGS				Failure Mileage	
				1000	
				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)		<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	
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		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 2006 HYUNDAI SONATA. THE CONTACT STATED THAT THE PASSENGER'S SIDE FRONT AIR BAG INDICATOR LIGHT REMAINED ILLUMINATED. THE VEHICLE WAS TAKEN TO THE DEALER NUMEROUS TIMES FOR THE FAILURE. THE DRIVER'S SIDE SEAT BELT BUCKLE AND THE FRONT PASSENGER'S SIDE AIR BAG SENSOR WAS REPLACED. IN ADDITION, FRONT PASSENGER'S SEAT SENSOR WAS REPROGRAMMED UNDER NHTSA CAMPAIGN NUMBER 08V161000 (AIR BAGS); HOWEVER THE FAILURE WAS NOT CORRECTED. THE MANUFACTURER WAS NOT MADE AWARE OF THE FAILURE. THE VEHICLE WAS NOT FULLY REPAIRED. THE APPROXIMATE FAILURE MILEAGE WAS 1,000 AND THE CURRENT MILEAGE WAS 100,000.					
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 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.					



DENNIS AUTOMOTIVE

Todd Kistler, Service Consultant
2900 Morse Road, Columbus, Ohio 43231
614.471.2900
tkistler@dennisservice.com
www.dennisimports.com

NIS AUTOPOINT
960 Morse Road
COLUMBUS, OHIO 43231
(614) 471-2900

CUSTOMER NO. 33259	ADVISOR TODD KISTLER	485	TAG NO. 805	INVOICE DATE 05/09/12	INVOICE NO. HYCS118757
WESTERVILLE, OH	LABOR RATE 93.00	LICENSE NO.	MILEAGE 90,813	COLOR BLUE/CLOTH	STOCK NO.
	YEAR / MAKE / MODEL 06/HYUNDAI/SONATA/			DELIVERY DATE	DELIVERY MILES
	VEHICLE I.D. NO. 5 N P E U 4 6 C 3 6 H			SELLING DEALER NO.	PRODUCTION DATE
	F.T.E. NO.	P.O. NO.		R.O. DATE 05/09/12	
BUSINESS PHONE	COMMENTS				MO: 90816

JOB# 1 CHARGES

LABOR
1 50HYZ01 ENGINE ELECT CONCERN TECH(S): 470 45.00
CUSTOMER STATES CUST STATES THE AIR BAG LIGHT IS ON - SOP
IS HERE FOR REPAIR
TROUBLE CODE B1701
REPLACED DRIVER'S SEAT BELT BUCKLE ASSY AND RETESTED
OK AT THIS TIME.

PARTS-----QTY-----FP-NUMBER-----DESCRIPTION-----UNIT PRICE-----
1 88830-0A000-QS BUCKLE ASSY-FR S/ 159.95
TOTAL - PARTS 159.95

MISC-----CODE-----DESCRIPTION-----CONTROL NO-----
HSCOUP HYUNDAI SERVICE COUPON -23.75
HPCOUP HYUNDAI PARTS COUPON -26.75
TOTAL - MISC -50.50

JOB# 1 TOTALS

LABOR 45.00
PARTS 159.95
MISC -50.50

JOB# 2 CHARGES

JOB# 1 JOURNAL PREFIX HYCS JOB# 1 TOTAL 154.45

LABOR
2 03HYZ01 MULTIPOINT INSPECT TECH(S): 470 0.00
MULTIPOINT INSPECTION TO BE PERFORMED
MULTIPOINT INSPECTION PERFORMED. SEE ATTACHED FORM

JOB# 2 TOTALS

JOB# 2 JOURNAL PREFIX HYCS JOB# 2 TOTAL 0.00

ESTIMATE
CUSTOMER HEREBY ACKNOWLEDGES RECEIVING
ORIGINAL ESTIMATE OF \$168.08 (+TAX)

COMMENTS
SPEND AND SAVE COUPON

Any warranties on the parts and accessories sold hereby are made by the manufacturer. The undersigned purchaser understands and agrees that dealer makes no warranties of any kind, express or implied, and disclaims all warranties, including warranties of merchantability or fitness for a particular purpose, with regard to the parts and/or accessories purchased; and that in no event shall dealer be liable for incidental or consequential damages or commercial losses arising out of such purchase. The undersigned purchaser further agrees that the warranties excluded by dealer include, but are not limited to, any warranties that such parts and/or accessories are of merchantable quality or that they will enable any vehicle or any of its systems to perform with reasonable safety, efficiency, or comfort.

X
CUSTOMER'S SIGNATURE

The Reynolds and Reynolds Company BRANTIAVE. CO662726 Q (10/10)



DENNIS AUTOMOTIVE

www.dennisimports.com

DENNIS AUTOPOINT

2960 Morse Road
COLUMBUS, OHIO 43231
(614) 471-2900

CUSTOMER NO. 33259	ADVISOR TODD KISTLER	485	TAG NO. 805	INVOICE DATE 05/09/12	INVOICE NO. HYCS18757
WESTERVILLE, OH	LABOR RATE 93.00	LICENSE NO.	MILEAGE 90,813	COLOR BLUE/CLOTH	STOCK NO.
	YEAR / MAKE / MODEL 06/HYUNDAI/SONATA/	DELIVERY DATE		DELIVERY MILES	
	VEHICLE I.D. NO. 5 N P E U 4 6 C 3 6 H	SELLING DEALER NO.		PRODUCTION DATE	
	F.T.E. NO.	P.O. NO.	R.O. DATE 05/09/12		
BUSINESS PHONE	COMMENTS			MO: 90816	

TOTALS -----

* NEXT RECOMMENDED SERVICE:
* 06/06/2012 / 90816 MI 88HZ99999 NEED OWNER AFFIDADID *

* [] CASH [] CHECK CK NO. [] *
* [] VISA [] MASTERCARD [] DISCOVER *
* [] AMER XPRESS [] OTHER [] CHARGE *

TOTAL LABOR....	45.00
TOTAL PARTS....	159.95
TOTAL SUBLET...	0.00
TOTAL G.O.G....	0.00
TOTAL MISC CHG.	0.00
TOTAL MISC DISC	-50.50
TOTAL TAX.....	13.84

TOTAL INVOICE \$ 168.29

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THANK YOU FOR YOUR BUSINESS!!

CUSTOMER SIGNATURE



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X

CUSTOMER'S SIGNATURE



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2960 Morse Road
COLUMBUS, OHIO 43231
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CUSTOMER NO. 33259		ADVISOR TODD KISTLER	485	TAG NO. 270	INVOICE DATE 07/31/13	INVOICE NO. HYCS146657
[REDACTED]		LABOR RATE 95.00	LICENSE NO. [REDACTED]	MILEAGE 111,128	COLOR BLUE/CLOTH	STOCK NO.
WESTERVILLE, OH [REDACTED]		YEAR / MAKE / MODEL 06/HYUNDAI/SONATA/			DELIVERY DATE	DELIVERY MILES
[REDACTED]		VEHICLE I.D. NO. 5 N P E U 4 6 C 3 6 H		SELLING DEALER NO.	PRODUCTION DATE	
RESIDENCE PHONE [REDACTED]	BUSINESS PHONE	F.T.E. NO.		P.O. NO.	R.O. DATE 07/31/13	
COMMENTS		MO: 111128				

JOB# 1 CHARGES-----
LABOR-----
JOB# 1 41HYZ01 Air Bag Light TECH(S):299 INTERNAL
Customer States Air Bag Light is on.
RAN DIAG HAD HISTORY CODE FOR HIGH RESISTANCE ON RF
AIRBAG. CHECKED ALL CONNECTIONS AND CLEARED CODE

JOB# 1 TOTALS-----
JOB# 1 JOURNAL PREFIX HYCS JOB# 1 TOTAL 0.00

ESTIMATE-----
CUSTOMER HEREBY ACKNOWLEDGES RECEIVING
ORIGINAL ESTIMATE OF \$95.00 (+TAX)

COMMENTS-----
WAIT created 2013-07-27 10:26:00am taken by Stacey Geist
DELETED OPERATION(S)
03HYZ01 MULTIPOINT INSPECT

TOTALS-----

* NEXT RECOMMENDED SERVICE: *
* 07/31/2013 / 111128 MI 88HYZ99999 NEED OWNER AFFIDADID *

* TOTAL LABOR.... 0.00 *
* TOTAL PARTS.... 0.00 *
* TOTAL SUBLET... 0.00 *
* TOTAL G.O.G.... 0.00 *
* TOTAL MISC CHG. 0.00 *
* TOTAL MISC DISC 0.00 *
* TOTAL TAX..... 0.00 *

TOTAL INVOICE \$ 0.00

THANK YOU FOR YOUR BUSINESS!!

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X
CUSTOMER'S SIGNATURE

CUSTOMER SIGNATURE

*Total Estimate
To Replace pas. seat Belt
\$ 314.91
not afford!*

The Reynolds and Reynolds Company, EPHRAIM, PA 17828 © (11/10)



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2960 Morse Road
COLUMBUS, OHIO 43231
(614) 471-2900

CUSTOMER NO. 33259	ADVISOR EVAN WERRIES	515	TAG NO. 875	INVOICE DATE 09/16/13	INVOICE NO. HYCS149781
WESTERVILLE, OH	LABOR RATE 95.00	LICENSE NO.	MILEAGE 112,612	COLOR BLUE/CLOTH	STOCK NO.
	YEAR / MAKE / MODEL 06/HYUNDAI/SONATA/			DELIVERY DATE	DELIVERY MILES
	VEHICLE I.D. NO. 5 N P E U 4 6 C 3 6 H			SELLING DEALER NO.	PRODUCTION DATE
	F.T.E. NO.	P. O. NO.		R. O. DATE 09/16/13	
BUSINESS PHONE	COMMENTS				MO: 112613

JOB# 1 CHARGES-----
LABOR-----
C/S AIRBAG LIGHT IS ON. CHECK AND ADVISE.
CODE B1706 BUCKLE PRETENSIONER PASSENGER RESISTANCE TOO HIGH
EST. TO REPAIR \$295 PLUS TAX AND S.S.
CUSTOMER DECLINED REPAIR AT THIS TIME.

JOB# 1 TOTALS-----
JOB# 1 JOURNAL PREFIX HYCS JOB# 1 TOTAL 0.00

JOB# 2 CHARGES-----
LABOR-----
PERFORM MULTI-POINT INSPECTION
MULTI-POINT INSPECTION COMPLETED

JOB# 2 TOTALS-----
JOB# 2 JOURNAL PREFIX HYCS JOB# 2 TOTAL 0.00

ESTIMATE-----
CUSTOMER HEREBY ACKNOWLEDGES RECEIVING
ORIGINAL ESTIMATE OF \$0.00 (+TAX)

COMMENTS-----
WAIT created 2013-09-12 12:52:00pm taken by Mike Harris

TOTALS-----

* NEXT RECOMMENDED SERVICE: *
* 10/14/2013 / 112613 MI 88HYZ99999 NEED OWNER AFFIDADID *

[] CASH	[] CHECK	CK NO. []	TOTAL LABOR....	0.00
[] VISA	[] MASTERCARD	[] DISCOVER	TOTAL PARTS....	0.00
[] AMER XPRESS	[] OTHER	[] CHARGE	TOTAL SUBLET...	0.00
			TOTAL G.O.G....	0.00
			TOTAL MISC CHG.	0.00
			TOTAL MISC DISC	0.00
			TOTAL TAX.....	0.00
			TOTAL INVOICE \$	0.00

THANK YOU FOR YOUR BUSINESS!!

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X _____
CUSTOMER'S SIGNATURE

The Reynolds and Reynolds Company ERM/IT/IVE C0607278 Q (10/10)