INFORMATION Redacted PURSUANT TO THE FREEDOM OF INFORMATION ACT (FOIA), 5 U.S.C . 552(B)(6)

OCT 2 - 2014

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: 19-AUG-2014	Repository ☐
	Reference No.: 10626326

OWNER INFORMATION (Type or Print)

Name: [redacted]		Daytime Telephone Number: [redacted]	E-mail Address: NOEMAIL@UNK.GOV
Address: [redacted]		Evening Telephone Number: N/A	
City: BETHEL PARK	State: PA	Zip Code: [redacted]	

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
KNAGE 224695 [redacted]	KIA	OPTIMA	2009

Date Purchased	Dealer's Name and Telephone Number			Engine: No: Cylinders	Fuel Type:
May 5-2009	#1 COCHRAN	412 788 4444		6	Reg Gas
Original Owner ☐	Dealer's City: PGH, PA	State: PA	Zip Code: 15205		

Transmission Type		Powertrain	Multiple Failure:	Incident Date(s)
AUTO.	☒ Antilock Brakes ☒ Cruise Control			13-AUG-2014

FAILED COMPONENT(S)/PART(S) INFORMATION

Vehicle Component Codes: VISIBILITY/WIPER (PWS), 132000 VISIBILITY: GLASS, SIDE/REAR	Failure Mileage	Failure Speed
	19000	

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	0	0	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 2009 KIA OPTIMA. WHILE THE VEHICLE WAS PARKED IN A GARAGE, THE REAR PASSENGER SIDE WINDOW SHATTERED. THE VEHICLE WAS NOT DIAGNOSED OR REPAIRED. THE MANUFACTURER WAS NOT NOTIFIED. THE VIN WAS NOT AVAILABLE. THE APPROXIMATE FAILURE MILEAGE WAS 19,000.

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)

The car was parked inside closed garage. This happened in the AM. We did not notice til 11 AM that next morning.

ATTACH ADDITIONAL SHEETS IF NECESSARY

U.S. 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

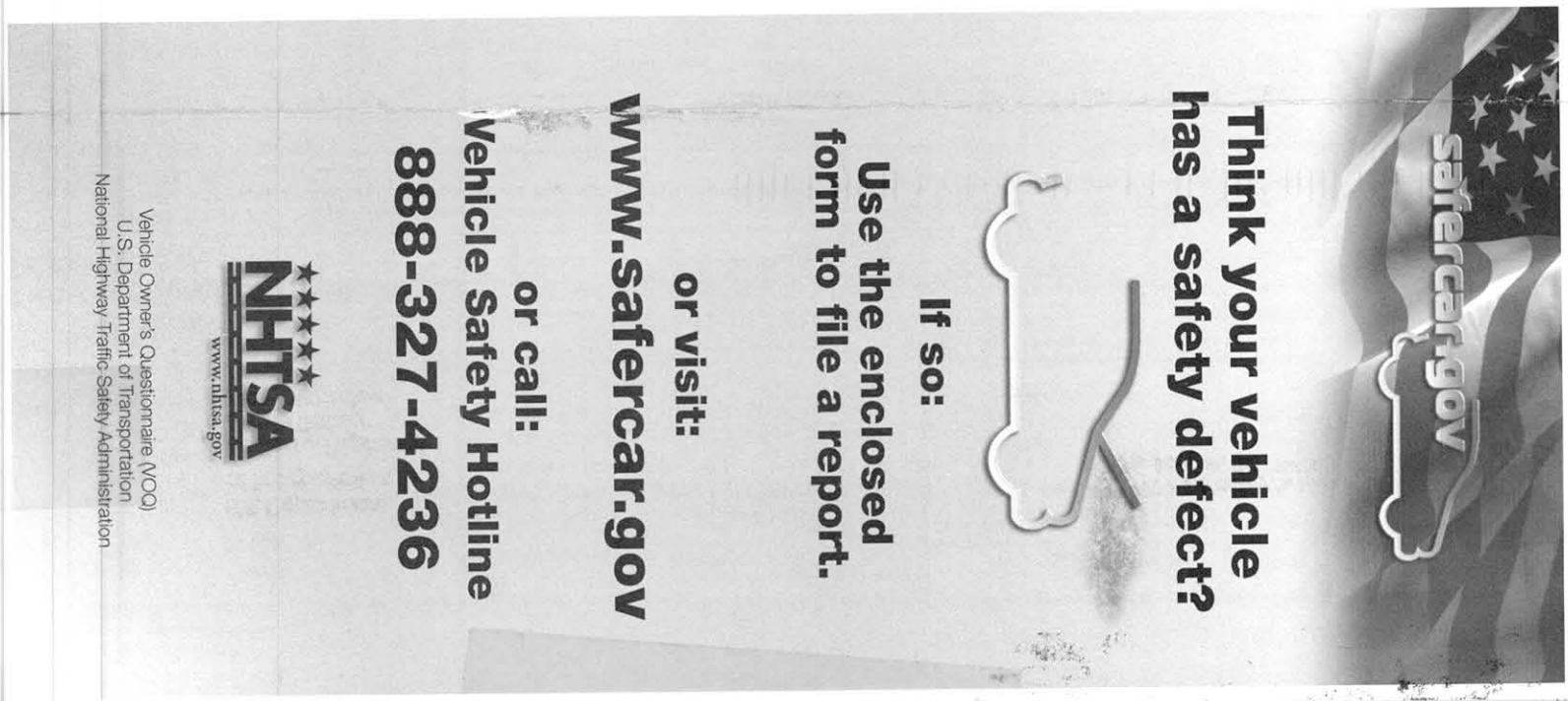
PITTSBURGH
PA 150
12 SEP '14
PM 6 L

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



Customer Receipt

Safelite® AutoGlass

SAFELITE AUTOGLASS
4500 CLAIRTON BLVD
PITTSBURGH, PA 15236
** SERVICE QUESTIONS **
** CALL 412-884-2539 **

Date & Time: 08/16/14 01:01PM

Customer:
[redacted]
Bethel Park, PA [redacted]

Home Phone: [redacted]
Work Phone:
Service Phone:
Work Order #:

Year	Make	Model
2009	KIA	OPTIMA

License [redacted]

Style
4 DOOR SEDAN

Stock/Unit#

Mileage
18331

VIN
KNAGE224695[redacted]

Purchase-Order#

Qty	Part	List Price	Selling Price	Flat Labor	Kit	MTRL
1	FD23028 GTN		264.95	60.00	0.00	0.00
1	MOBILE FEE		0.00	24.99	0.00	0.00

Technician Name: Travis Hause

Tech ID: 1817-242

Technician Note:

Part Subtotal:	264.95
Flat Labor Subtotal:	84.99
Subtotal:	349.94
Sales Tax:	24.50
Total:	374.44
Deductible:	0.00
Promo Discount:	0.00
Amount to Collect:	374.44
Payment Amount:	374.44
Amt Remaining:	0.00

Paid by Check Number [redacted] in the amount of $374.44

Your vehicle has been vacuumed!
Your exterior windows have been cleaned!

Signature: Signature on file.

Safe to drive vehicle after: N/A