

 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 OFFICIAL USE ONLY 100148 Date Received 24-SEP-2014 NOV 10 2014		Repository <input type="checkbox"/> Reference No. 10638783	
OWNER INFORMATION (Type or Print)							
Name		Address		City		State	Zip Code
[REDACTED]		[REDACTED]		ROCKVILLE CENTRE		NY	[REDACTED]
Daytime Telephone Number		Evening Telephone Number		E-mail Address			
[REDACTED]		[REDACTED]		[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	
KNDMC233686 [REDACTED]				HYUNDAI	ENTOURAGE	2008	
Date Purchased		Dealer's Name and Telephone Number			Engine:	Fuel Type:	
8/08		HYUNDAI OF VALLEY STREAM			No: Cylinders	GAS	
Original Owner		Dealer's City		State	Zip Code		
<input checked="" type="checkbox"/>		VALLEY STREAM		NY			
Transmission Type		<input checked="" type="checkbox"/> Antilock Brakes	Powertrain	Multiple Failure:		Incident Date(s)	
AUTO		<input type="checkbox"/> Cruise Control				20-SEP-2014	
FAILED COMPONENT(S)/PART(S) INFORMATION							
Vehicle Component Codes: 110000 ELECTRICAL SYSTEM, 113000 ELECTRICAL SYSTEM: STARTER ASSEMBLY					Failure Mileage	Failure Speed	
					60630		
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	<input type="checkbox"/> 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	
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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 2008 HYUNDAI ENTOURAGE. WHILE PARKED, THE VEHICLE FAILED TO START. THE VEHICLE WAS TAKEN TO A MECHANIC WHO STATED THAT THE STARTER NEEDED TO BE REPLACED. THE VEHICLE WAS REPAIRED AND THE MANUFACTURER WAS NOTIFIED. THE FAILURE MILEAGE WAS 60,630.							
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.							

ROCKVILLE CENTRE AUTO REPAIR CORPORATION

Invoice

131 N. PARK AVE.
Rockville Centre, NY 11570
Shop Phone: (516) 764-1700

Estimate Ref #0
Date Printed: 09/22/2014
Printed Time: 11:11 am

Ha/Ref:

SUPERIOR SERVICE AT COMPETITIVE PRICES

Time Promised:

2008 HYUNDAI ENTOURAGE GL V6 3.8L 3778CC FI GAS N 3
VIN: KNDMC233686

Rockville Centre, NY
Home: Work:
Cell:

License: Mileage In: 60,632 Date Written: 09/20/2014
Unit #: Mileage Out: 60,632 Written By:
DOM: Save Old Parts: No

Job Name	Description	Technician	Qty	List	Extended
Job #1 Labor 0	PERFORM 27 PT INSP Work Requested - PERFORM 27 PT INSP		0.00	85.00	0.00
Job #2 Labor 0 Part STARTER	NO START Work Requested - NO START STARTER		2.00 1.00	85.00 225.00	170.00 225.00
<i>Original part returned as a core (Part)</i>					
Job #3 Labor 0	LOF Work Requested - LOF Work Performed - PERFORMED LOF		0.00	85.00	0.00

ROCKVILLE CENTRE AUTO REPAIR
131 N PARK AVE
ROCKVILLE CTR, NY 11570
516 764-1700

Merchant ID: 7920

Ref #: 0001

Sale

XXXXXXXXXX
MAST

Entry Method: Swiped

Total: \$ 431.09

09/22/14

11:13:00

Inv #:

Appr Code: 74927P

Transaction ID:

Approved: Online

Batch#: 000433

Method	Amount
Payment Totals:	

Parts: \$225.00
 Labor: \$170.00
 Sublet: \$0.00
 Misc: \$0.00
 Hazmat: \$0.00
 Supplies: \$2.00

Tax Total: \$34.09

Invoice Total: **\$431.09**

Customer Copy

THANK YOU!

THANK YOU FOR YOUR BUSINESS

I hereby authorize the above repair work to be done along with the necessary material and hereby grant you and/or your employees permission to operate the car or truck 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 car or truck to secure the amount of repairs thereto.

Authorized By _____

Date _____

Time _____



Millennium Hyundai LLC
d/b/a

**MILLENNIUM
HYUNDAI**

220 North Franklin Street
Hempstead, NY 11550
Service 516 282 3805 Parts 516 282 3810

CELL: [REDACTED]

CUSTOMER NO. [REDACTED]	ADVISOR MANUEL HERRERA	90707	TAG NO 1457	INVOICE DATE 10/07/14	[REDACTED]
[REDACTED]	LABOR RATE 110.00	LICENSE NO.	MILEAGE 62,323	COLOR	STOCK NO.
ROCKVILLE CENTRE, NY	YEAR/MAKE/MODEL 08/HYUNDAI/ENTOURAGE/4DR VAN GLS			DELIVERY DATE	DELIVERY MILES
[REDACTED]	VEHICLE I.D. NO. KNDM C 2 3 3 6 8 6			SELLING DEALER NO.	PRODUCTION DATE
[REDACTED]	F.T.E. NO.	P.O. NO.	R.O. DATE 10/07/14		[REDACTED]
[REDACTED]	BUSINESS PHONE	COMMENTS			MO: [REDACTED]

LABOR & PARTS
 J# 1.01HZ XXX MAINTENANCE XXX TECH(S):97305 INTERNAL
 CUSTOMER STATES HAD STARTER REPLACED BY OUTSIDE SHOP,
 REQUEST TO HAVE STARTER ASSEMBLY INSEPECTED FOR PROPER
 INSTALLATION AND OPERATION
 TECH INSPECTED STARTER, ROAD TESTED OK PERFORMED VISUAL
 INSPECTION, APPEARS TO BE INSTALLED TO FACTORY SPECS
 ROAD TESTED OK

JOB # 1 TOTAL LABOR & PARTS 0.00

ESTIMATE
 CUSTOMER HEREBY ACKNOWLEDGES RECEIVING
 ORIGINAL ESTIMATE OF \$0.00 (+TAX)
 COMMENTS
 WAIT created 2014-09-24 06:32:00pm taken by Jyrome Gabin

TOTALS
 MILLENNIUM HYUNDAI THANKS YOU!!!!
 WE HOPE YOU ENJOYED YOUR VISIT TO OUR BRAND NEW FACILITY!!
 WE HAVE THE NEWEST AND BEST DIAGNOSTIC EQUIPMENT AVAILABLE
 TO MAINTAIN YOUR HYUNDAI
 ***** ATTENTION *****
 YOU MAY RECEIVE A SURVEY IN YOUR EMAIL OR MAIL FROM HYUNDAI.
 WE WOULD VERY MUCH APPRECIATE YOU SCORING US WITH ALL "10'S"
 YOU MAY RECEIVE A SURVEY IN YOUR EMAIL OR MAIL FROM HYUNDAI.
 AND IF YOU CAN'T, PLEASE LET US KNOW WHY. THANK YOU!

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

ANY WARRANTIES ON THE PRODUCT SOLD HEREBY ARE
 THOSE MADE BY THE MANUFACTURER. THE SELLER
 HEREBY EXPRESSLY DISCLAIMS ALL WARRANTIES,
 EITHER EXPRESS OR IMPLIED, INCLUDING ANY IMPLIED
 WARRANTY OF MERCHANTABILITY OR FITNESS FOR A
 PARTICULAR PURPOSE, AND NEITHER ASSUMES NOR
 AUTHORIZES ANY OTHER PERSON TO ASSUME FOR IT
 ANY LIABILITY IN CONNECTION WITH THE SALE OF SAID
 PRODUCTS.

LABOR AND PARTS ARE WARRANTED FOR 90 DAYS
 OR 4000 MILES, WHICHEVER OCCURS FIRST.

LIMITED EXPRESS WARRANTY

Warranty on Original Equipment Parts
 installed is 12 months or 12000 miles.
 All other parts and labor is covered for 90
 days or 4000 miles, whichever comes first.
 The dealer hereby limits any implied
 warranties of merchantability and fitness
 to the same period.

CUSTOMER ACKNOWLEDGES
 REC. OF COPY X

**CUSTOMER SATISFACTION
 IS OUR
 NUMBER 1 CONCERN.**

Thank you
 for this opportunity to serve you.

NYS R/S NO. 7112088

CUSTOMER SIGNATURE _____
 ***** DUPLICATE INVOICE *****

The Reynolds and Reynolds Company Hudson, NY 12534

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

MID-ISLAND

NY 117

30 OCT '14

PM 6 L



NO POSTAGE
NECESSARY
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UNITED STATES



BUSINESS REPLY MAIL

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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**



**Think your vehicle
has a safety defect?**



If so:

**Use the enclosed
form to file a report.**

or visit:

www.safercar.gov

or call:

**Vehicle Safety Hotline
888-327-4236**



Vehicle Owner's Questionnaire (VOQ)
U.S. Department of Transportation
National Highway Traffic Safety Administration

