


INFORMATION Redacted PURSUANT TO THE FREEDOM OF

 U.S. Department of Transportation National Highway Traffic Safety Administration	INFORMATION ACT (FOIA), <b>Vehicle Owner's Questionnaire</b> To Report Vehicle Safety Defects 1-888-DASH-2-DOT (1-888-327-4236) INTERNET: www.nhtsa.dot.gov/hotline	FOR AGENCY USE ONLY (Do Not Write) 5 U.S.C. 552(B)(6) 100148
	Date Received 28-DEC-2015 FEB 22 2016	Repository <input type="checkbox"/> Reference No. 10816495
<b>OWNER INFORMATION (Type or Print)</b>		Daytime Telephone Number Evening Telephone Number
Name Address City WAYNESVILLE State NC Zip Code		E-mail Address
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).		
<b>VEHICLE INFORMATION</b>		
17 digit Vehicle Identification Number Located at bottom of windshield on driver's side		Make KIA
		Model SEDONA
		Model Year 2006
Date Purchased	Dealer's Name and Telephone Number	
Engine: No: Cylinders	Fuel Type:	
Original Owner <input type="checkbox"/>	Dealer's City	State Zip Code
Transmission Type <input type="checkbox"/> Antilock Brakes <input type="checkbox"/> Cruise Control	Powertrain	Multiple Failure: Incident Date(s) 26-DEC-2015
<b>FAILED COMPONENT(S)/PART(S) INFORMATION</b>		
Vehicle Component Codes: 180000 VEHICLE SPEED CONTROL, BRAKES (PWS)		Failure Mileage Failure Speed 20
<b>ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A TIRE FAILURE</b>		
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:
<b>ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A CHILD SEAT FAILURE</b>		
Make:	Date Manufactured:	Model No./Name:
Seat Type:	Installation System:	
Child Seat Component Code:		Failed Part:
<b>APPLICABLE INCIDENT INFORMATION</b> (Please describe in detail the incident(s), failure(s), crash(es), and injury(ies).)		
Crash <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Fire <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Number of Persons Injured Number of Deaths 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 KIA SEDONA. WHILE DRIVING APPROXIMATELY 20 MPH, THE CONTACT DEPRESSED THE BRAKE PEDAL AND THE VEHICLE CONTINUED TO ACCELERATE. THE CONTACT PLACED AN ABNORMAL AMOUNT OF PRESSURE ON THE BRAKE PEDAL, BUT THE VEHICLE ACCELERATED FORWARD BEFORE COMING TO AN ABRUPT STOP. THE FAILURE RECURRED AND THE VEHICLE BEGAN TO SMOKE WITH AN ABNORMAL ODOR FROM THE HOOD OF THE VEHICLE. THE VEHICLE WAS NOT DIAGNOSED OR REPAIRED. THE VEHICLE WAS INOPERABLE. THE MANUFACTURER WAS NOT MADE AWARE OF THE FAILURE. THE VIN AND FAILURE MILEAGE WERE UNKNOWN.  VIN # KNDMD233766 MILE ~ 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 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.		