



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

27-NOV-2017

MAR 01 2017

Repository ☐

Reference No.

11048687

OWNER INFORMATION (Type or Print)

Name

Address

City

LEHIGH ACRES

State FL

Zip Code

Daytime Telephone Number

Evening Telephone Number

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).

VEHICLE INFORMATION

17 digit Vehicle Identification Number Located at bottom of windshield on driver's side

5NPEB4AC1EH

Make

HYUNDAI

Model

SONATA

Model Year

2014

Date Purchased

MARCH 2014

Dealer's Name and Telephone Number

O'BRIEN HYUNDAI 239-277-1222

Engine:

No: Cylinders

Fuel Type:

Original Owner

☒

Dealer's City

FORT MYERS, FL

State

Zip Code

FL 33966

Transmission Type

AUTO

☒ Antilock Brakes

☒ Cruise Control

Powertrain

4 CYLINDER

Multiple Failure:

YES

Incident Date(s)

10-OCT-2017

FAILED COMPONENT(S)/PART(S) INFORMATION

Vehicle Component Code: 110000 ELECTRICAL SYSTEM

Failure Mileage

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
☐ 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

☐ Yes ☒ No

Fire

☐ Yes ☒ 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 2014 HYUNDAI SONATA. THE CONTACT STATED THAT THE DIRECTIONAL SIGNAL FLICKERED ON AND OFF WHENEVER THE TURN SIGNAL WAS ACTIVATED. THE CONTACT TRIED TO MAKE A LEFT TURN AND, AFTER ACTIVATING THE TURN SIGNAL, THE HEADLIGHTS TURNED OFF AND ON. THE O'BRIEN HYUNDAI DEALER (2850 COLONIAL BLVD, FORT MYERS, FL 33966) WAS NOTIFIED OF THE FAILURE. THE LIGHT BULBS WERE CHANGED, BUT THE FAILURE RECURRED. THE MANUFACTURE WAS NOT NOTIFIED. THE VIN WAS UNKNOWN. THE APPROXIMATE FAILURE MILEAGE WAS 37,500.

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.