



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

Repository

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OWNER INFORMATION (Type or Print)

Name: [REDACTED]
Address: [REDACTED]
City: WEST SENECA State: NY Zip Code: [REDACTED]

Daytime Telephone Number

E-mail Address

Evening Telephone Number

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: **KNDPCCAC367** [REDACTED]
Make: KIA Model: SPORTAGE Model Year: 2016
Date Purchased: [REDACTED] Dealer's Name and Telephone Number: **West Herr Chevrolet, 716-514-4138** Engine: [REDACTED] Fuel Type: [REDACTED]
Original Owner: Dealer's City: **Orchard Park** State: **NY** Zip Code: **14127**
Transmission Type: [REDACTED] Antilock Brakes Powertrain: [REDACTED] Multiple Failure: [REDACTED] Incident Date(s): **18/12/18**
 Cruise Control **DEC-2018**

FAILED COMPONENT(S)/PART(S) INFORMATION

Vehicle Component Codes: 010000 STEERING, 140000 AIR BAGS Failure Mileage: [REDACTED] Failure Speed: 5

ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A TIRE FAILURE

Tire Make: [REDACTED] Tire Model (Name or Number): [REDACTED] Tire Size (Example P215/65R15): [REDACTED]
DOT No. (Example: DOTM19ABC036): [REDACTED] Original Equipment Prior Repair Failure Location: [REDACTED]
Tire Component Code: [REDACTED] Tire Failure Type: [REDACTED]

ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A CHILD SEAT FAILURE

Make: [REDACTED] Date Manufactured: [REDACTED] Model No./Name: [REDACTED]
Seat Type: [REDACTED] Installation System: [REDACTED]
Child Seat Component Code: [REDACTED] Failed Part: [REDACTED]

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: 1 Number of Deaths: 0 Reported to Police: Y

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 OWNED A 2016 KIA SPORTAGE. WHILE THE CONTACT'S SON WAS MAKING A RIGHT TURN AT 5 MPH, HE LOST CONTROL OF THE VEHICLE. THE STEERING SEIZED, WHICH CAUSED THE VEHICLE TO CRASH INTO A TREE AND BURST INTO FLAMES. IT WAS UNKNOWN IF THE AIR BAGS DEPLOYED. THE CONTACT'S SON SUFFERED A CONCUSSION AND SOUGHT MEDICAL ATTENTION. A POLICE REPORT WAS FILED. THE FIRE DEPARTMENT EXTINGUISHED THE FIRE. THE VEHICLE WAS DEEMED TOTALED BY THE CONTACT'S INSURANCE COMPANY. THE DEALER AND MANUFACTURER WERE NOT CONTACTED. THE FAILURE MILEAGE AND VIN WERE UNKNOWN.

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.