

OF INFORMATION ACT (FOIA), 5 U.S.C.552(B)(6)

From: [DataQuality, DataQuality \(NHTSA\)](#)
To: [EVOQ \(NHTSA\)](#)
Subject: FW: Returning Corrected Complaint Document
Date: Monday, June 8, 2020 3:13:45 PM
Attachments: [REDACTED]

Questionnaire

From: [REDACTED]
Sent: Monday, June 08, 2020 2:35 PM
To: DataQuality, DataQuality (NHTSA) <DataQuality@dot.gov>
Subject: Returning Corrected Complaint Document

Corrected last name and model on the document.

Thank you,
[REDACTED]

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		
U.S. Department of Transportation National Highway Traffic Safety Administration				Date Received 22-MAY-2020		Repository ☐
						Reference No. 11325549
OWNER INFORMATION (Type or Print)						
Name				Daytime Telephone Number		E-mail Address
Address						
City		State	Zip Code	Evening Telephone Number		
HUNTING BEACH		CA				
<i>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).</i>						
VEHICLE INFORMATION						
17 digit Vehicle Identification Number Located at bottom of windshield on driver's side KMHD35LE7DU				Make HYUNDAI	Model ELANTRA GT	Model Year 2013
Date Purchased		Dealer's Name and Telephone Number			Engine: No: Cylinders	Fuel Type:
Original Owner ☐		Dealer's City		State	Zip Code	
Transmission Type	☐ Antilock Brakes ☐ Cruise Control	Powertrain	Multiple Failure:		Incident Date(s) 01-JAN-2020	
FAILED COMPONENT(S)/PART(S) INFORMATION						
Vehicle Component Codes: AIR BAGS: CLOCKSPRING/SPIRAL CASSETTE FOR DRIVER AIR BAG MODULE, 010000 STEERING					Failure Mileage 67000	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 <i>(Please describe in detail the incident(s), failure(s), crash(es), and injury(ies).)</i>						
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 2013 HYUNDAI ELANTRA. THE CONTACT STATED THAT THE AIR BAGS WARNING LIGHT WAS ILLUMINATED. THE VEHICLE WAS TAKEN TO RUSSELL WESTBROOK HYUNDAI OF GARDEN GROVE (9898 TRASK AVE, GARDEN GROVE, CA 92844, (714) 793-0035) TO BE DIAGNOSED. THE CONTACT WAS INFORMED THAT THE CLOCK SPRING NEEDED TO BE REPLACED. THE VEHICLE WAS NOT REPAIRED. THE VIN WAS NOT COVERED UNDER WARRANTY OR RECALL. THE MANUFACTURER WAS MADE AWARE OF THE FAILURE AND A CASE WAS FILED. THE APPROXIMATE FAILURE MILEAGE WAS 67,000.						
Include, if available: Police/Fire Department Report, Photos, and Repair Invoice. ATTACH ADDITIONAL SHEETS IF NECESSARY						