

INFORMATION REDACTED PURSUANT TO THE FREEDOM OF INFORMATION ACT (FOIA), 5 U.S.C.552(B)(6)

U.S. Department of Transportation National Highway Traffic Safety Administration		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	
OWNER INFORMATION (Type or Print)		Date Received 11-AUG-2020 SEP 22 2020		Repository <input type="checkbox"/> Reference No. 11348571	
Name [REDACTED]		Daytime Telephone Number [REDACTED]		E-mail Address [REDACTED]	
Address [REDACTED]		Evening Telephone Number [REDACTED]			
City HAWTHORNE		State CA		Zip Code [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 5XYKU4A69DG [REDACTED]		Make KIA	Model SORENTO	Model Year 2013	
Date Purchased Nov-2013	Dealer's Name and Telephone Number Kia of Carson 1562-569-4008		Engine: No: Cylinders 4	Fuel Type: gas	
Original Owner <input checked="" type="checkbox"/>	Dealer's City Carson		State Ca	Zip Code	
Transmission Type automatic	<input checked="" type="checkbox"/> Antilock Brakes	Powertrain	Multiple Failure:	Incident Date(s) 01-AUG-2019	
<input checked="" type="checkbox"/> Cruise Control					
FAILED COMPONENT(S)/PART(S) INFORMATION					
Vehicle Component Code: 100000 POWER TRAIN			Failure Mileage 90000	Failure Speed all speeds	
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 <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Fire <input type="checkbox"/> Yes <input checked="" 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 2013 KIA SORENTO. THE CONTACT STATED THAT HIS VEHICLE WOULD SHUTOFF WITHOUT WARNING WHILE AT A COMPLETE STOP, OR WHILE DRIVING AT VARIOUS SPEEDS. THE CONTACT STATED THAT ONCE THE VEHICLE WAS RESTARTED, THE VEHICLE WOULD RESUME NORMAL OPERATION. THE CONTACT HAD TAKEN THE VEHICLE TO TROPHY KIA OF CARSON (22020 RECREATION RD, CARSON, CA 90745) ON THREE SEPARATE OCCASIONS HOWEVER, EACH TIME, THE DEALER WAS UNABLE TO DUPLICATE OR DIAGNOSE THE FAILURE. THE FAILURE RECURRED. THE MANUFACTURER HAD YET TO BE NOTIFIED OF THE FAILURE. THE VEHICLE HAD YET TO BE REPAIRED. THE FAILURE MILEAGE WAS APPROXIMATELY 90,000.					
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 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.					

Narrative Description of Incident(s), Failure(s), Crash(es), and Injury(ies)

The vehicle shut off randomly. RPM Gauge will go to zero while driving streets or freeway. I would have to pull over, shut off car and restart to reset car to run properly

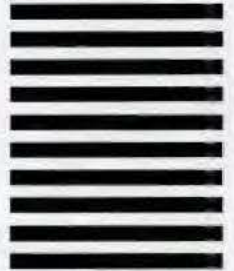
ATTACH ADDITIONAL SHEETS IF NECESSARY

LOS ANGELES CA 900

8 SEP 2020 PM 11 L



NO POSTAGE
NECESSARY
IF MAILED
IN THE
UNITED STATES



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

BUSINESS REPLY MAIL
FIRST CLASS MAIL PERMIT NO. 1888 WASHINGTON, DC
POSTAGE WILL BE PAID BY ADDRESSEE

US Department of Transportation
National Highway Traffic Safety Administration
Office of Defects Investigation, NEF-100
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

