

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

From: [REDACTED]
To: [EVOQ \(NHTSA\)](#)
Cc: [DataQuality, DataQuality \(NHTSA\)](#)
Subject: RE: Follow up to ODI Complaint ----- 11464577-----
Date: Tuesday, September 27, 2022 10:58:34 AM
Attachments: [REDACTED]
Importance: High

CAUTION: This email originated from outside of the Department of Transportation (DOT). Do not click on links or open attachments unless you recognize the sender and know the content is safe.

Attached is the my completed form.

Sincerely,

[REDACTED]

[REDACTED]

Winchester, VA [REDACTED]

[REDACTED]

From: EVOQ (NHTSA) <EVOQ@dot.gov>
Sent: Thursday, September 1, 2022 4:51 PM
To: [REDACTED]
Subject: FW: Follow up to ODI Complaint ----- 11464577-----

CAUTION: This email originated from outside of DHS. DO NOT click links or open attachments unless you recognize and/or trust the sender. Please select the Phish Alert Report button on the top right of your screen to report this email if it is unsolicited or suspicious in nature.

Please see the attached copy of your recent complaint and instructions. Please make any necessary edits and return via email to dataquality@dot.gov or fax to (202) 366-1767. Due to the volume of complaints we receive and our limited resources, we cannot respond to every complaint.
 NHTSA/Office of Defects Investigation



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
 13-MAY-2022

Repository

Reference No.
 11464577

OWNER INFORMATION (Type or Print)

Name [REDACTED]
 Address [REDACTED]
 City Fort Lee State VA ZIP Code [REDACTED]

Daytime Telephone Number [REDACTED]

E-mail Address [REDACTED]

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 KNDPBCAC5G7 [REDACTED] | | MAKE KIA | Model SPORTAGE | Model Year 2016 |
| Date Purchased 07/18/2016 | Dealer's Name and Telephone Number Parsons Kia (540) 252-04 | | Engine: No. Cylinders | Fuel Type: Regular- Unleaded |
| Original Owner <input checked="" type="checkbox"/> | Dealer's City Puyallup WINCHESTER | STATE VA | ZIP Code 22601 | |
| Transmission Type AUTOMATIC | <input checked="" type="checkbox"/> Antilock Brakes <input checked="" type="checkbox"/> Cruise Control | Powertrain LIMITED WARRANTY | Multiple Failure: ENGINE AND FUEL PUMP | Incident Date(s) 13-MAY-2022 |

FAILED COMPONENT(S)/PART(S) INFORMATION

| | | |
|---|-----------------------------|---------------------|
| Vehicle Components Codes: 060000 ENGINE (PWS) ENGINE, FUEL injector Pump | Failure Mileage 105000.0 | Failure Speed 70 |
|---|-----------------------------|---------------------|

ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A TIRE FAILURE

| | | |
|-----------------------------------|--|--|
| Tire Make KELLY | Tire Model (Name or Number) H-ALL SEASON | Tire Size (Example P215/65R15) 225/6017 |
| DOT No. (Example: DOTMAL 9ABC036) | <input type="checkbox"/> Original Requirement <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), 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), 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).

The contact owns a 2016 Kia Sportage. The contact stated while driving approximately 70 MPH, she noticed that the vehicle was losing power. The contact stated that she was able to pull off the roadway to assess the vehicle. The contact stated that no warning lights were illuminated. The contact stated that she then attempted to restart the vehicle and the engine would not turn over; however, the vehicle regained electrical power. The contact stated that she then had her vehicle towed to an independent mechanic where it remained. The contact was informed that the engine needed to be replaced. The vehicle was not repaired. The dealer was not notified; however, the manufacturer was made aware of the failure but offered no assistance. The failure mileage was 105,000.

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