

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

U.S. Department
of TransportationNational 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

08-JUL-2022

Repository Reference No.
11472958

OWNER INFORMATION (Type or Print)

Name

Address

City

Joliet

State

IL

ZIP Code

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
5NMZT3LB7JHMAKE
HYUNDAIModel
SANTA FE SPORTModel Year
2018

Date Purchased

November 2019

Dealer's Name and Telephone Number

Thomas Toyota 815-744-2760

Engine:
No: Cylinders

4

Fuel Type:

Reg
Unleaded

Original Owner

 NO

Dealer's City Joliet

STATE
ILZIP Code
60435

Transmission Type

6 Speed

 Antilock Brakes Cruise Control

Powertrain

Multiple Failure:

Incident Date(s)

08-MAR-2022

FAILED COMPONENT(S)/PART(S) INFORMATION

Vehicle Components Codes: 060000 ENGINE (PWS)

Failure Mileage
68000.0

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: DOTMAL 9ABC036)

 Original Requirement
 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

 Yes No

Fire

 Yes 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 2018 Hyundai Santa Fe Sport. The contact stated that upon taking the vehicle to several independent mechanics for oil changes, she was informed at each occasion that the vehicle was experiencing excessive oil consumption. The vehicle was taken to the local dealer where it was diagnosed that an overnight soak procedure needed to be performed to compensate or resolve the issue. The vehicle was not repaired. The manufacturer was not notified of the failure. The failure mileage was approximately 68,000.

* We have to put oil in this vehicle every 2 weeks. Constantly between oil changes. The vehicle is not covered under a warranty because we are not the original owners.

Include, if available: Police/Fire Department Report, Photos, and Repair Invoice.

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.

ATTACH ADDITIONAL SHEETS IF NECESSARY