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Form Approved: O.M.B. No. 2127-0004

US Department of Transportation

National Highway Traffic Safety Administration

DOT Auto Safety Hotline

Vehicle Owner's Questionnaire

TO REPORT VEHICLE SAFETY DEFECT
1-888-DASH-2-DOT
1-888-327-4236
INTERNET: http://www.nhtsa.dot.gov

RECEIVED
00 JUN 20 PM 1:17
OFFICE DEFECTS INVESTIGATION

AGENCY USE ONLY

QC'd

Date Received

Od_or ___ ___
rt_dt ___ ___
od_rt ___ ___
up_ltr ___ ___

Reference No.

552722

OWNER INFORMATION (Type or Print)

Name [redacted]

Street [redacted]

City [redacted]

Daytime Telephone Number [redacted]

Do you authorize NHTSA to provide a copy of this report to the manufacturer of your vehicle? ☒ YES ☐ NO

In the absence of an authorization, NHTSA WILL NOT provide your name or address to the vehicle manufacturer.

Signature of Owner [redacted] Date 6/13/00

VEHICLE INFORMATION

Vehicle Ident. No. (VIN.) (17 Digits) (Located at bottom of windshield on driver's side)	Vehicle Make	Vehicle Model	Vehicle Year	Current Odometer Reading
KMHVF24N0XU584601	Hyundai	Accent	1999	12026

Purchased Date	Dealer's Name	Engine Size (CID/CC/L)	
☒ New ☐ Used	Dealer's City: Rochester State: NY Zip Code: 14623	No. Cylinders 4	☐ Turbo ☐ Diesel ☒ Gas ☐ Fuel Injection

Transmission Type	Antilock Brakes	Restraint System	Cruise Control	Drivetrain	Vehicle Type	Body Style
☐ Manual ☒ Automatic	☐ Yes ☒ No	☒ Driverside Airbag ☐ Motorbelt ☒ Passengerside Airbag ☐ 2-Point Belt ☐ 3-Point Belt	☐ Yes ☒ No	☒ Front ☐ Rear ☐ 4-Wheel	☒ Car ☐ Sport Utl. ☐ Van ☐ Truck ☐ Minivan ☐ Motorcycle ☐ Other	☐ 2-Door ☒ 4-Door ☐ Stationwagon ☐ Pick Up Truck ☐ Other

FAILED COMPONENT(S)/PART(S) INFORMATION

Component	Part Name(s)	Location	Failed Part(s)
		☐ Left ☐ Right ☐ Front ☐ Rear	☐ Original ☐ Replacement

No. of Failures	Date(s) of Failure(s) / Mileage at Failure(s) / Vehicle Speed at Failure(s):	Failed Part(s) Available?	NHTSA Previously Contacted?
		☐ Yes ☐ No	☐ Yes ☐ No

APPLICABLE INCIDENT INFORMATION

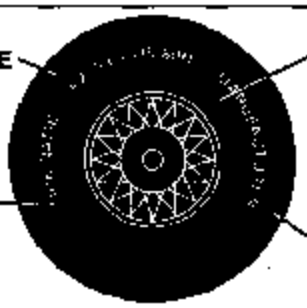
(Please describe in detail the incident(s), Failure(s), Crash(es), and Injury(ies) on the back of this form)

Crash	Fire	Number Persons Injured	Number of Fatalities	Estimated Property Damage	Reported to Police
☐ Yes ☒ No	☐ Yes ☒ No	0	0	$	☐ Yes ☒ No

INFORMATION ON TIRE FAILURE(S) *(IF APPLICABLE)*

To report **defective** or **failed** tires provide the following: DOT Number, Tire Manufacturer, Tire Name, Tire Size (include all numbers and letters).
Note: This information not required for normal operation tires.

DOT												Manufacturer	Tire Name	Complete Tire Size
D	O	T												



U.S. DOT safety standard code
The number may be on the inner side of the tire and have up to 11 letters and numbers. Usually located near rim flange on side opposite whitewall or on either side of blackwall tire.

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 maybe used to assist the NHTSA in determining whether a manufacturer should take appropriate action to correct a safety defect. If the NHTSA proceeds with administration enforcement or litigation against a manufacturer, your response, or a statistical summary thereof, may be used in support of the agency's action.*

HS-Form 350 (Rev. 3-98)

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

On 9/95 I purchased a Hyundai Accent. In the period between 4000 to 5000 I noticed that when the rear windows are lowered, the wind makes a very loud noise. The faster you go - the worse it becomes. The local dealership did notice the problem. They also drive a 2000 Accent and it made the same noise. Thus, they stated it is a design situation. They stated to contact the Hyundai people. That I did.

I contacted Hyundai American Motors(HA) and they stated that problem is built into the design of the car. The force of the wind hits the glass panel when partially lowered and creates the noise. They are aware of this, but have not changed the design.

As a consumer I am informing this Agency that such noise is very distracting for the driver. Accidents will occur because of this. This vehicle should be recalled to fix the problem. (I do not have A/C in the car.) I have filed a complaint #550273 with Hyundai American Motors.

ATTACH ADDITIONAL SHEETS IF NECESSARY

U.S. Department of Transportation

National Highway Traffic Safety Administration

400 Seventh St., S.W.
Washington, D.C. 20590

Official Business
Penalty for Private Use $300

NO POSTAGE NECESSARY IF MAILED IN THE UNITED STATES

BUSINESS REPLY MAIL

FIRST CLASS PERMIT NO 73173 WASHINGTON, D.C.

POSTAGE WILL BE PAID BY NATL. HWY. TRAFFIC SAFETY ADMIN.

U.S. Department of Transportation
National Highway Traffic Safety Administration
DOT Auto Safety Hotline, NSA-10.1
400 7th Street, SW
Washington, DC 20590

VEHICLE OWNER'S QUESTIONNAIRE

DOT AUTO SAFETY HOTLINE

TO REPORT VEHICLE SAFETY DEFECTS
COMPLETE THIS FORM
OR

DASH2DOT

and dial toll free at

1-888-DASH-2-DOT

1-888-327-4236

DOT Auto Safety Hotline
(DASH) 2 DOT

U.S. Department of Transportation
National Highway Traffic Safety Administration
http://www.nhtsa.dot.gov/hotline

ATTORNEY GENERAL ELIOT SPITZER

STATE OF NEW YORK
OFFICE OF THE ATTORNEY GENERAL
BUREAU OF CONSUMER FRAUDS AND PROTECTION
144 Exchange Boulevard
Rochester, NY 14614-2176
Tel. (716) 327-3240 Fax (716) 546-7514

COMPLAINT FORM

Consumer Hotline 1 (800) 771-7755 For Hearing Impaired TDD (800) 788-9898
http://www.oag.state.ny.us

1. PLEASE BE SURE TO COMPLAIN TO THE COMPANY OR INDIVIDUAL BEFORE FILING.
2. PLEASE TYPE OR PRINT CLEARLY IN DARK INK.
3. YOU MUST COMPLETE THE ENTIRE FORM. INCOMPLETE OR UNCLEAR FORMS WILL BE RETURNED TO YOU.
4. MAKE SURE YOU ENCLOSE COPIES OF IMPORTANT PAPERS CONCERNING YOUR TRANSACTION.

CONSUMER

YOUR NAME [redacted] HOME TELEPHONE NUMBER [redacted]

COMPLAINT

NAME OF SELLER OR PROVIDER OF SERVICES	NAME OF OTHER SELLER OR PROVIDER OF SERVICES
Dick Ide Hyundai (now Visions Hyundai)	Hyundai Motor Corp
STREET ADDRESS 3525 W. Henrietta Rd	STREET ADDRESS
CITY/TOWN Rochester STATE NY ZIP 14623	CITY/TOWN STATE ZIP
TELEPHONE NUMBER 292 0500	TELEPHONE NUMBER

DATE OF TRANSACTION	COST OF PRODUCT OR SERVICE	HOW PAID (Check those which apply)
9/00	$ 10,600.00	☐ Cash ☐ Check ☐ Credit Card ☑ Other Auto loan

DID YOU SIGN A CONTRACT?	WHERE DID YOU SIGN THE CONTRACT	DATE SIGNED
☑ Yes ☐ No	Dick Ide Hyundai	9/00

WAS PRODUCT OR SERVICE ADVERTISED?	WHERE WAS IT ADVERTISED?	DATE ADVERTISED
☑ Yes ☐ No	paper	8/00 - 9/00

TYPE OF COMPLAINT (e.g. Car, Mail Order, etc. Use the reverse side of this form to provide details)
CAR

DATE YOU COMPLAINED TO THE COMPANY OR INDIVIDUAL	PERSON CONTACTED	JOB TITLE
6/1/00 ☐ By Mail ☐ By Telephone ☑ In Person	Anthony Cintron	Service Advisor

NATURE OF RESPONSE	DATE OF RESPONSE
checked out my concerns - see attached sheet	6/1/00

HAVE YOU SUBMITTED THIS MATTER TO ANOTHER AGENCY OR ATTORNEY? (If "Yes", give name and address)	IS COURT ACTION PENDING?
☑ Yes ☐ No National dept of transportation	☐ Yes ☐ No

ADDITIONAL INFORMATION

MANUFACTURER OF PRODUCT: Hyundai Motors

ADDRESS:

PRODUCT MODEL OR SERIAL NUMBER	WARRANTY EXPIRATION DATE
Accent KMHVF24NOYU584601	

DID BUSINESS ARRANGE FINANCING? (If "Yes", give name and address of bank or finance company)
☑ Yes ☐ No Charter One Bank PO Box 20361, Roch 14602

PLEASE DESCRIBE COMPLAINT ON REVERSE SIDE

BRIEFLY DESCRIBE YOUR COMPLAINT On 9/99 I purchased a hyundai accent from Dick Ide Hyundai. In the period of 4/00 - 5/00 I noticed that when the rear windows are rolled down, the wind makes a very loud noise. The faster you go - the worse the noise. I took the car to the local hyundai dealer to have it checked. They test drove my car and a 2000 Accent. The result was that it was a design situation, nothing they could do to fix it.

I perceive this situation to be unsafe for any driver. The noise that is produced hinders any noise that is coming from the outside. Since I do not have A/C, those windows are down during hot days. In essence, it is an annoying & also a very unsafe driving situation. * I have contacted Hyundai Motors - they state it is a design situation and has not been changed yet. Complaint Ref # 550273 At Hyundai Motors

WHAT FORM OF RELIEF ARE YOU SEEKING? (e.g., exchange, repair or money back, etc.) to fix the problem (ie) factory recall or to have vehicle outlated.

WHO REFERRED YOU TO THIS OFFICE? myself

READ THE FOLLOWING BEFORE SIGNING BELOW

PLEASE ATTACH TO THIS FORM PHOTOCOPIES of any papers involved (contracts, warranties, bills received, canceled checks, correspondence, etc.) **DO NOT SEND ORIGINALS.**

NOTE: In order to resolve your complaint, we may send a copy of this form to the person or firm about whom you are complaining.

In filing this complaint, I understand that the Attorney General is not my private attorney, but represents the public in enforcing laws designed to protect the public from misleading or unlawful business practices. I also understand that if I have any questions concerning my legal rights or responsibilities, I should contact a private attorney. I have no objection to the contents of this complaint being forwarded to the business or person the complaint is directed against. The above complaint is true and accurate to the best of my knowledge.

I also understand that any false statements made in this complaint are punishable as a Class A Misdemeanor under Section 175.30 and/or Section 210.45 of the Penal Law.

Signature: [redacted] Date: 6/6/00

HAVE YOU ENCLOSED COPIES OF IMPORTANT PAPERS?

Return to: **Office of the Attorney General**
Bureau of Consumer Frauds and Protection
144 Exchange Boulevard
Rochester, NY 14614-2176

[redacted]

VISION HYUNDAI
2525 WEST HENRIETTA RD
ROCHESTER NY 14623

SERVICE ADVISOR ANTHONY CINTRON

REPAIR ORDER WRITTEN	DATE READY	STOCK NO.	VEHICLE IDENTIFICATION	CUST. NO.	TAG NO.	P.O. NO.	INVOICE PRINTED	INVOICE NO.
01JUN00	01JUN00	X5046	KMHVF24N0XU584601	28210			01JUN00	5638

TIME IN	TIME READY	YEAR	MAKE & MODEL	TELEPHONE NO.	CUST. PAY LABOR RATE	PAYMENT DATE	ADVISOR NO.	B/K
16:05	18:04	1999	HYUNDAI ACCENT	[redacted]	N/A	10SEP99	95	95

MILEAGE IN	MILEAGE OUT	LICENSE NO.
11642	11649	WEG944

	LABOR	PARTS	TOTAL
A CUSTOMER STATES WHEN REAR WINDOWS ARE DOWN AND DRIVING 40 MPH THEY MAKE A CHATTERING NOISE SEEM TO BE EXCESSIVELY LOOSE CUST TECHNICIAN CHECKED REAR WINDOW ADJUSTMENTS ALL OK DROVE SIMILAR CAR TO DETERMINE IF NORMAL IS A CHARACTERISTIC OF THE CAR. 91 ISP			(N/C)
B CUSTOMER STATES SMELLS A EXHAUST ODOR FROM VEHICLE CUST UNABLE TO DUPLICATE CONCERN POSSIBLE TYPE OF GAS 91 CP	0.00	0.00	0.00
EST: 0.00 01JUN00 16:05 SA: 95			

1-800 829 9956

** PRE-INVOICE **

DESCRIPTION	TOTALS
LABOR AMOUNT	0.00
PARTS AMOUNT	0.00
GAS,OIL, LUBE	0.00
SUBLET AMOUNT	0.00
MISC. CHARGES	0.00
TOTAL CHARGES	0.00
LESS INSURANCE	0.00
SALES TAX	0.00
PLEASE PAY THIS AMOUNT	0.00

I hereby authorize the repair work herein set forth to be done along with the necessary material and agree that you are not responsible for loss or damage to vehicle or articles left in vehicle in case of fire, theft, or any other cause beyond your control or for any delays caused by unavailability of parts or delays in parts shipments by the supplier or transporter. I hereby grant you and/or your employees permission to operate the vehicle herein described on streets, highways or elsewhere for the purpose of testing and/or inspection. An express mechanic's lien is hereby acknowledged on above vehicle to secure the amount of repairs thereto.

I HEREBY ACKNOWLEDGE RECEIPT OF A COPY HEREOF.

X_____

THANK YOU FOR DOING BUSINESS WITH VISION HYUNDAI.ANY FUTURE NEEDS PLEASE CALL.
TO BETTER SERVE YOU LOOK FOR NEW HOURS COMING SOON! MONDAY THRU FRIDAY 7:30 AM UNTILL 9:00 PM SATURDAYS TILL 6:00 PM MAY 1ST
NOW SERVICG YOU DAVID GERO ANTHONY CINTRON, DAVID AFFRONTI & CHRIS STEVENSON

ON BEHALF OF SERVICING DEALER, I HEREBY CERTIFY THAT THE INFORMATION CONTAINED HEREON IS ACCURATE UNLESS OTHERWISE SHOWN. SERVICES DESCRIBED WERE PERFORMED AT NO CHARGE TO OWNER, THERE WAS NO INDICATION FROM THE APPEARANCE OF THE VEHICLE OR OTHERWISE, THAT ANY PART REPAIRED OR REPLACED UNDER THIS CLAIM HAD BEEN CONNECTED IN ANY WAY WITH ANY ACCIDENT, NEGLIGENCE OR MISUSE. RECORDS SUPPORTING THIS CLAIM ARE AVAILABLE FOR (1) YEAR FROM THE DATE OF PAYMENT NOTIFICATION AT THE SERVICING DEALER FOR INSPECTION BY MANUFACTURER'S REPRESENTATIVE.

(SIGNED) DEALER, GENERAL MANAGER OR AUTHORIZED PERSON DATE

CUSTOMER COPY