



U.S. Department
of Transportation
**National Highway
Traffic Safety
Administration**

Auto Safety Hotline

Vehicle Owner's Questionnaire

NATIONWIDE 1-800-424-9393
DC METRO AREA (202) 366-0123
INTERNET: <http://www.nhtsa.dot.gov>

FOR AGENCY USE ONLY 258

Date Received

20-APR-2002

Od. or _____
rt. dt. _____
pd. rt. _____
rp. ltr. _____

Reference No.

760942

Do you authorize NHTSA to provide a copy of report to the manufacturer of your vehicle? YES NO
In the absence of an authorization, NHTSA WILL NOT provide your name and address to the vehicle manufacturer.

Signature of Owner _____ Date ____/____/____

VEHICLE INFORMATION

| | | | | | | |
|--|---|--|--|---|---|--|
| Vehicle Ident. No. (VIN) <small>(Location at bottom of and/or above windshield)</small> KMHCG35C42U172892 | Vehicle Make HYUNDAI | Vehicle Model ACCENT | Vehicle Year 2002 | Current Odometer Reading | | |
| Purchase Date 01-DEC-2001 | Dealer's Name _____ | Engine Size (CID/CC/L) 1.6L | <input type="checkbox"/> Turbo <input type="checkbox"/> Diesel <input type="checkbox"/> Gas <input checked="" type="checkbox"/> Fuel Injectio | | | |
| <input checked="" type="checkbox"/> New <input type="checkbox"/> Used | City _____ State _____ Zip Code _____ | No Cylinders _____ | | | | |
| Transmission Type <input type="checkbox"/> Manual <input type="checkbox"/> Automatic | Antilock Brakes <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | Restraint System <input type="checkbox"/> 3-Point Belt <input type="checkbox"/> Motorbelt <input type="checkbox"/> Driverside Airbag <input type="checkbox"/> 2-Point Bel <input type="checkbox"/> Passengerside Airbag | Cruise Control <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | Drive Train <input checked="" type="checkbox"/> Front <input type="checkbox"/> Rear <input type="checkbox"/> 4-Wheel | Vehicle Type <input type="checkbox"/> Car <input type="checkbox"/> Sport Util <input type="checkbox"/> Van <input type="checkbox"/> Truck <input type="checkbox"/> Minivan <input type="checkbox"/> Motorcycle <input type="checkbox"/> Other _____ | Body Style <input type="checkbox"/> 2-Door <input type="checkbox"/> 4-Door <input type="checkbox"/> Stationwagon <input type="checkbox"/> Pick Up Truck <input checked="" type="checkbox"/> Other _____ |

FAILED COMPONENT(S)/PART(S) INFORMATION

| | | | |
|-----------------------------------|---|--|--|
| Component 12420000 12422000 | Part Name(s) INTERIOR SYSTEMS:INSTRUMENT PANEL:GAUGE:INDICATOR INTERIOR SYSTEMS:INSTRUMENT PANEL:GAUGE:INDICATOR:DI | Location <input type="checkbox"/> Left <input type="checkbox"/> Right <input type="checkbox"/> Front <input type="checkbox"/> Rear | Failed Part's <input type="checkbox"/> Original <input type="checkbox"/> Replacement |
| No of Failure 1 | Date(s) of Failure(s) 10-APR-2002 | Failed Part(s) <input type="checkbox"/> Yes <input type="checkbox"/> No | NHTSA Previously <input type="checkbox"/> Yes <input type="checkbox"/> No |
| | Mileage at Failure(s) 2320 | | |
| | Vehicle Speed at Failure(s) 70 | | |

APPLICATION INCIDENT INFORMATION

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

| | | | | | |
|---|---|---------------------------------------|----------------------------------|--------------------------|---|
| Crash <input type="checkbox"/> Yes <input type="checkbox"/> No | Fire <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | Number of Persons Injured 0 | Number of Fatalities 0 | Estimated Property Damag | Reported to Police <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |
|---|---|---------------------------------------|----------------------------------|--------------------------|---|

NARRATIVE DESCRIPTION OF FAILURE(S), INCIDENT(S), INJURY(IES)

THE CHECK ENGINE LIGHT CAME ON WHEN THE CAR WAS DRIVING AT HIGHWAY SPEEDS. THE CAR WAS STALLING OUT, WAS HOLDING A READY SPEED. THE ENGINE KEPT STALLING OUT. PUSH CLUTCH IN, AND PULL OVER. SHUT DOWN ENGINE, LOOK UNDERHOOD, SEE NO PROBLEM. RESTARTED AND NO MORE PROBLEMS. THE DEALER'S SHOP HOOKED UP HI SCAN AND CHECKED FOR CODES "ECU". NO CODES, ALL SYSTEM PASS CHECKED OVER CURRENT DATA-OK. I HAD GOOD DRY GAS IN TANK. CAR WAS FULL OF GOOD GAS AND WARM UP FROM DRIVING FOR TWO HOURS AT HIGHWAY SPEED.. BEEN DRIVING FOR 30 MINTURES. AND CHECK ENGINE LIGHT CAN ON, ETC, ETC. *AK

CONTINUE ON REVERSE

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.