

785445


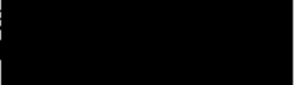
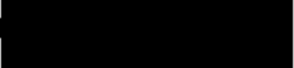
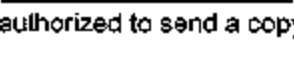
From: feedback@cartalk.com
To: Beverly <NHTSA> Young, Alberto <NHTSA> Jimenez
Date: 8/6/01 5:08PM
Subject: Car Talk VOQ submission

* This data was submitted via a fill-in form at the Cartalk web site
* (<http://www.cartalk.cars.com/Tools/nhtsa.pl>) If you have any problems
* or suggestions regarding the format of this submission, send email
* to webmaster@cartalk.com

SUBMISSION DATE: Monday, August 6th 2001 at 5:07:35 PM

VEHICLE OWNER'S QUESTIONNAIRE
=====

OWNER INFORMATION

NAME: 
ADDRESS: 
M: 
TELEPHONE: 

NHTSA authorized to send a copy of this report to the manufacturer: No

VEHICLE INFORMATION

VIN: KNDJA723XY5636098
MAKE: KIA
MODEL: Sportage
YEAR: 2000

ODOMETER: 22347
PURCHASE DATE: 07/03/00
NEW OR USED: New

DEALER NAME: Boch KIA
ADDRESS: Norwood, MA 02062

ENGINE SIZE: 2.0L
CYLINDERS:

FUEL INJECTION: Yes
TURBO: No
FUEL TYPE:
ANTILOCK BRAKES: Yes
CRUISE CONTROL: Yes

DRIVETRAIN: 4 Wheel
DRIVER AIRBAG: Yes
PASSENGER AIRBAG: Yes
3-POINT BELT: Yes
MOTOR BELT: No
2-POINT BELT: No
BODY STYLE: 4-Door

FAILED COMPONENT(S)/PART(S) INFORMATION

COMPONENT: Front wheel hub assembly

PART NAME(S):

LOCATION: Right Front

NUMBER OF FAILURES: 1

DATE(S) OF FAILURES: 07/01

MILEAGE AT FAILURE(S): ca. 20000

SPEED AT FAILURE(S): n/a

MANUFATURER CONTACTED: Yes

NHTSA CONTACTED: No

APPLICABLE ACCIDENT INFORMATION

ACCIDENT:

FIRE:

NUMBER OF PERSONS INJURED:

NUMBER OF FATALITIES:

ESTIMATED PROPERTY DAMAGE: \$

DRIVER AIRBAG DEPLOYED:

PASSENGER AIRBAG DEPLOYED:

REPORTED TO POLICE:

INFORMATION ON TIRE FAILURE(S) (IF APPLICABLE)

DOT NUMBER: DOT

TIRE MANUFACTURER:

TIRE NAME:

TIRE SIZE:

ADDITIONAL COMMENTS

Vehicle failed State safety inspection due to loose right front bearing. Returned to dealer for service. Both front wheel hub assemblies were replaced under warranty; service report describes hubs as "corroded due to faulty inner seals."

END OF FORM



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 106

Date Received

06-AUG-2001

Od_or _____
rt_dt _____
pd_rt _____
rp_lr _____

Reference No.

785445

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>	Vehicle Make	Vehicle Model	Vehicle Year	Current Odometer Reading		
KNDJA723XY5636098	KIA	SPORTAGE	2000			
Purchase Date 03-JUL-2000	Dealer's Name _____	Engine Size (CID/CC/L) 2.0L	<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 checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Restraint System <input checked="" 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 checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Drive Train <input type="checkbox"/> Front <input type="checkbox"/> Rear <input checked="" 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 checked="" type="checkbox"/> 4-Door <input type="checkbox"/> Stationwagon <input type="checkbox"/> Pick Up Truck <input type="checkbox"/> Other _____

FAILED COMPONENT(S)/PART(S) INFORMATION

Component 02170000	Part Name(s) SUSPENSION:INDEPENDENT FRONT:BEARING WHEEL	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) 01-JUL-2001 20000	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) _____			

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	Number of Fatalities	Estimated Property Damag	Reported to Police <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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NARRATIVE DESCRIPTION OF FAILURE(S), INCIDENT(S), INJURY(IES)

VEHICLE FAILED SAFETY INSPECTION DUE TO LOOSE RIGHT FRONT BEARING, CONSUMER TOOK VEHICLE TO DEALER FOR SERVICE AND BOTH FRONT WHEEL HUB ASSEMBLIES WERE REPLACED, CONSUMER WAS INFORMED THAT HUBS WERE CORRODED DUE TO FAULTY INNER SEALS.*JB

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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.