



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 336

Date Received

10-SEP-2001

Od_or _____
rt_dt _____
pd_rt _____
rp_lr _____

Reference No.

896094

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) _____ (Location at bottom of windshield and driver's side)		Vehicle Make KIA	Vehicle Model SPORTAGE	Vehicle Year 1998	Current Odometer Reading _____
Purchase Date ☐ New ☒ Used	Dealer's Name _____ City _____ State _____ Zip Code _____		Engine Size (CID/CC/L) _____ No Cylinders _____	☐ Turbo ☐ Diesel ☐ Gas ☐ Fuel Injection	
Transmission Type ☐ Manual ☒ Automatic	Antilock Brakes ☐ Yes ☒ No	Restraint System ☐ 3-Point Belt ☐ Motorbelt ☐ Driverside Airbag ☐ 2-Point Bel ☐ Passengerside Airbag	Cruise Control ☐ Yes ☒ No	Drive Train ☐ Front ☐ Rear ☐ 4-Wheel	Vehicle Type ☐ Car ☐ Sport Util ☐ Van ☐ Truck ☐ Minivan ☐ Motorcycle ☐ Other _____ Body Style ☐ 2-Door ☐ 4-Door ☐ Stationwagon ☐ Pick Up Truck ☐ Other _____

FAILED COMPONENT(S)/PART(S) INFORMATION

Component 07300000 07381000	Part Name(s) POWER TRAIN:TRANSMISSION:AUTOMATIC POWER TRAIN:TRANSMISSION:AUTOMATIC:OVERDRIVE	Location ☐ Left ☐ Right ☐ Front ☐ Rear	Failed Part(s) ☐ Original ☐ Replacement
No of Failure	Date(s) of Failure(s) 08-AUG-2001 Mileage at Failure(s) _____	Failed Part(s) ☐ Yes ☐ No	NHTSA Previously ☐ Yes ☐ No

APPLICATION INCIDENT INFORMATION

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

Crash ☐ Yes ☒ No	Fire ☐ Yes ☒ No	Number of Persons Injured	Number of Fatalities	Estimated Property Damag	Reported to Police ☐ Yes ☒ No
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NARRATIVE DESCRIPTION OF FAILURE(S), INCIDENT(S), INJURY(IES)

CONSUMER STATES WHILE TRAVELING BETWEEN 20 AND 30 MPH, ANOTHER VEHICLE WAS CUT OFF BY A ANOTHER DRIVER . CONSUMER STATES THIS CAUSED CONSUMER TO HIT THE BACK OF A BUS. CONSUMER STATES WHEN PRESSING ON THE BRAKES VEHICLE WOULD NOT STOP. CONSUMER HIT THE BACK OF A BUS BEFORE VEHICLE WOULD STOP. PLEASE PROVIDE ANY FURTHER INFORMATION.

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.

 DOT Auto Safety Hotline Vehicle Owner's Questionnaire (VOQ) NAT ONWIDE 1-888-DASH-2-DOT 1-888-327-4236 www.nhtsa.dot.gov/hotline		FOR AGENCY USE ONLY 335 Date Received <u>11-SEP-2001</u> Defects <u>11</u> Work Number <u>713993</u> Home Number <u>896094</u>	
OWNER INFORMATION (Type or Print) Do you authorize NHTSA to provide a copy of report to the manufacturer of your vehicle? In the absence of an <u>Signature of Owner</u> <u>713993</u> your name and address to the vehicle's manufacturer. Signature of Owner <u>713993</u> Date <u>9/26/01</u>		Date Received <u>11-SEP-2001</u> Defects <u>11</u> Work Number <u>713993</u> Home Number <u>896094</u>	
VEHICLE INFORMATION			
Vehicle Identification Number (VIN) (located at front of windshield on driver's side) <u>KNDJ5B7238W555269L1C</u>	Vehicle Make <u>KIA</u>	Vehicle Model <u>SPORTAGE</u>	Vehicle Year <u>1998</u>
Purchase Date <u>8/29/00</u>		Current Odometer Reading <u>48,625.00</u>	
☐ New ☒ Used	Dealer's Name <u>Webb Ford</u>		Engine Size (CID/CC/L) <u>4</u>
☐ New ☒ Used	City <u>Highland</u> State <u>IN</u> Zip Code <u></u>	No Cylinders <u>4</u>	
Transmission Type ☐ Manual ☒ Automatic	Anti-lock Brakes ☒ Yes ☐ No	Restraint System ☐ 3-Point Belt ☐ Motorbelt ☒ Driverside Airbag ☐ 2-Point Belt ☒ Passengerside Airbag	Cruise Control ☐ Yes ☒ No
Drive Train ☒ Front ☐ Rear ☐ 4-Wheel		Vehicle Type ☐ Car ☒ Sport Utility Truck ☐ Van ☐ Motorcycle ☐ Minivan ☐ Other	Body Style ☐ 2-Door ☒ 4-Door ☐ Stationwagon ☐ Pick Up ☐ Truck
FAILED COMPONENT(S)/PART(S) INFORMATION			
Component <u>07300000</u> <u>07381000</u>	Part Name(s) <u>POWER TRAIN:TRANSMISSION:AUTOMATIC</u> <u>POWER TRAIN:TRANSMISSION:AUTOMATIC:OVERDRIVE</u>	Location ☐ Left ☐ Right ☐ Front ☐ Rear	Failed Part(s) ☐ Original ☐ Replacement
No of Failures <u>2</u>	Date(s) of Failure(s) <u>08-AUG-2001</u> Mileage at Failure(s) <u>47,000-000</u> Vehicle Speed at Failure(s) <u>25-30</u>	Failed Part(s) ☒ Yes ☐ No	NHTSA Previously ☐ Yes ☐ No
APPLICATION INCIDENT INFORMATION			
(Please describe in detail the incident(s), Failure(s), Crash(es), and injury(ies) on the back of this form)			
Crash ☒ Yes ☐ No	Fire ☐ Yes ☒ No	Number of Persons Injured <u>2</u>	Number of Fatalities <u>NA</u>
Estimated Property Damage <u>47,259.99</u>		Reported to Police ☒ Yes ☐ No	
NARRATIVE DESCRIPTION OF FAILURE(S), INCIDENT(S), INJURY(IES)			
CONSUMER STATES WHILE TRAVELING BETWEEN 20 AND 30 MPH, ANOTHER VEHICLE WAS CUT OFF BY A ANOTHER DRIVER. CONSUMER STATES THIS CAUSED CONSUMER TO HIT THE BACK OF A BUS. CONSUMER STATES WHEN PRESSING ON THE BRAKES VEHICLE WOULD NOT STOP. CONSUMER HIT THE BACK OF A BUS BEFORE VEHICLE WOULD STOP. PLEASE PROVIDE ANY FURTHER INFORMATION.			
<i>Police was called on truck statement, the bus in front had no brake lights, car cut bus off, I tried to stop, when I saw what was happening, apply breaks car jump, air got broken, did not stop.</i>			
CONTINUE ON BACK IF NEEDED			
The Privacy Act of 1974 (Public Law 93-57) 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.			

Fold to show Return Address (no stamp needed) Fasten with tape or staples and mail																													
INFORMATION ON TIRE FAILURE(S) (IF APPLICABLE)																													
TIRE IDENTIFICATION NO.:																													
<table border="1"> <tr> <td colspan="2">MANUFACTURER/TIRE NAME</td> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td> </tr> <tr> <td colspan="2">SIZE</td> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td> </tr> </table>										MANUFACTURER/TIRE NAME										SIZE									
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SIZE																													
* The identification number consists of 7 to 10 letters and numerals following the letters DOT. It is usually located near the rim flange on the side opposite the whitewall or on either side of a blackwall tire.																													
NARRATIVE DESCRIPTION (CONTINUED)																													