



U.S. Department of Transportation
National 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 100161

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OWNER INFORMATION (Type or Print)

Name: [Redacted]
Address: [Redacted]
City: DURHAM State: NC Zip Code: [Redacted]
Daytime Telephone Number: [Redacted] E-mail Address:
Evening Telephone Number:

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: _____ Date: / /

VEHICLE INFORMATION

Make: NISSAN Model: XTERRA Model Year: 2001
Date Purchased: 2/2001 Dealer's Name and Telephone Number: MICHAEL JORDAN RPM NISSAN
Original Owner: Dealer's City: DURHAM State: NC Zip Code: 27707
Engine: No. Cylinders: _____ Fuel Type: _____
Transmission Type: Antilock Brakes Powertrain: 4 WHEEL DRIVE Vehicle Component Code: 133000 VISIBILITY: POWER WINDOW DEVICES AND CONTROLS
AUTOMATIC Cruise Control Multiple Failure: 1

FAILED COMPONENT(S)/PART(S) INFORMATION

Incident Date(s): _____ Failure Mileage: AFTER 36,000 MI. Failure Speed: _____ WINDOW REGULATORS IN ALL 4 DOORS

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: DOTM19ABC036) Original Equipment Prior Repair Failure Location: _____
Tire Component Code: _____ The 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), and injury(ies).)

Crash: Yes No Fire: Yes No Number of Persons Injured: N/A Number of Deaths: N/A Reported to Police: N

Narrative Description of Incident(s), Crash(es), and 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).

ALL THE POWER WINDOWS ARE NOT FUNCTIONING PROPERLY. THE VEHICLE WAS TAKEN TO THE DEALER, WHO STATED THAT REGULATORS ARE OFF TRACK WHICH CAUSES A PROBLEM WITH THE ELECTRIC MOTOR. *AK

ALL 4 (DRIVERS SIDE, PASSENGER SIDE, FRONT, AND REAR REGULATORS HAVE ALL FAILED AFTER 36,000 MILES DUE TO POOR DESIGN WHICH WAS DIAGNOSED WITH + BY A NISSAN SPECIALIST.

Include, if available: Police/Fire Department Report, Photos, and Repair Invoices. ATTACH ADDITIONAL SHEETS IF NECESSARY.

The Privacy Act of 1974—Public Law 93-502 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.