



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

Date Received: **10043923**
2003 OCT 12 PM 2:45

Od_or _____
r_at _____
od_it _____
up_tr _____

Reference No. _____

OWNER INFORMATION (Type or Print)

Name: _____
Street No: _____ Apt. No: _____
City: **E. ORANGE** State: **N.J.** Zip Code: _____

Daytime 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: **9/13/03**

PRODUCT INFORMATION

Vehicle Identification No. (VIN): **JN1DA31AX3TH311931** (Located at bottom of windshield on driver's side)
Make: **NISSAN** Model: **MAXIMA** Year: **2003**
Submodel: **GLE**

Purchased Date: **01/07/03** Dealer's Name: **ROUTE 22 NISSAN** Engine Size (CID/CCL): **3.5** Turbo:
 Diesel Gas Fuel Injection
 New Used Dealer's City: **Hillside** State: **N.J.** Zip Code: _____ No. Cylinders: **6**

Manufacture Date (on driver's door or pillar): _____ Transmission Type: Manual Automatic
Restraint System: Driver's Side Air Bag Motorbelt Passenger's Side Air Bag 2-Point Belt 3-Point Belt
Cruise Control: Yes No
Drivetrain: Front Rear 4-Wheel
Vehicle Type: Car Sport Utility Van Truck Minivan Motorcycle Other
Body Style: 2-Door 4-Door Stationwagon Pick Up Truck Other

FAILED COMPONENT(S)/PART(S) INFORMATION

Part Name(s)	Location	Failed Part(s)	Handicap Adaptive Equip
	<input type="checkbox"/> Left <input type="checkbox"/> Right <input type="checkbox"/> Front <input type="checkbox"/> Rear	<input type="checkbox"/> Original <input type="checkbox"/> Replacement	<input type="checkbox"/> Yes <input type="checkbox"/> No

TO BE COMPLETED WHEN REPORTING A TIRE FAILURE

Tire Brand: _____ Tire Name: _____
Complete Tire Size: _____ DOT No.: _____

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

APPLICABLE INCIDENT INFORMATION
(Please describe in detail the incident(s), failure(s), crash(es), and injury(ies). Attach photos if available.)

Crash: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Fire: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Number of Persons Injured: _____	Number of Fatalities: _____	Reported to Manufacturer: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
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Narrative Description of Incident(s), Failure(s), Crash(es), and Injury(ies): **ON 01/07/03 I PURCHASED A 2003 NISSAN MAXIMA. ON 11/10/03 MY CAR WAS VANDALIZED, AND THE HEADLIGHTS WERE STOLEN, AND THEN IT HAPPENED 2 MORE TIMES AFTER THAT. NOW AFTER THE 2ND INCIDENT THE MANUFACTURER HAD A WARNING THAT THEIR DEVICES WERE STOLEN 2 WEEKS AFTER THAT THEY STOLEN A 3RD TIME. SINCE THEN THE ONLY OTHER HELP THAT WAS OFFERED WAS A \$3000 INCENTIVE TOWARDS A TRADE IN.**

The Privacy Act of 1974 - Public Law 93-579 This information is requested pursuant to a 49 U.S.C. Chapter 301. You are under no obligation to respond to this questionnaire. Your response may be used to assist NHTSA in determining whether a manufacturer should take appropriate action to correct a safety defect. If 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.

By this way I paid 28,851.00 cash for this car and that's all they say that they can do for me.

This is NOT FAIR AT ALL, WHAT NISSAN NEEDS TO DO IS GIVE ME ANOTHER CAR WITH OUT THESE HEADLIGHTS, OR REFUND MY MONEY, OR RECALL THESE CARS AND STABILIZE THESE LIGHTS, BECAUSE THE INSTALLATION IS VERY POOR.

I THINK IT'S UNSAFE TO DRIVE WITHOUT HEADLIGHTS THE CAR DEALER THAT PURCHASED THE CAR WON'T EVEN OFFER ME A REASONABLE DEAL WITHOUT \$8,000.00 OR 9,000.00 THAT BECICULOUS.

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
Office of Defects Investigation, NSA-10.01
400 7th Street, SW
Washington, DC 20590



Complete and return or place in your car manual for future use

**VEHICLE
OWNER'S
QUESTIONNAIRE
(V00Q)**



DOT AUTO SAFETY HOTLINE

TO REPORT VEHICLE SAFETY DEFECTS
COMPLETE THIS FORM
OR

DASH 2 DOT

and dial toll free at

1-888-DASH-2-DOT

1-888-327-4236

DOT Auto Safety Hotline
(DASH) 2 DOT



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