



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 100079

Date Received JUN 13 PM 2 26

Repository

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Reference No.
10050087

OWNER INFORMATION (Type or Print)

Name: [REDACTED]
Address: [REDACTED]
City: BOYNTON BEACH State: FL Zip Code: [REDACTED]

Daytime Telephone Number: [REDACTED]

E-mail Address: [REDACTED]

Evening Telephone Number: [REDACTED]

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: 1/1

VEHICLE INFORMATION

17 digit Vehicle Identification Number Located at bottom of windshield on driver's side: IN4BK3109V [REDACTED]
Make: NISSAN Model: ALTIMA Model Year: 1997
Date Purchased: 12/12/96 Dealer's Name and Telephone Number: KAM NISSAN
Engine: No. Cylinders: 6 Fuel Type: Gas
Original Owner: Dealer's City: WEST PALM State: FL Zip Code: 33415
Transmission Type: AUTOMATIC Antilock Brakes Cruise Control Powertrain: UNKNOWN Vehicle Component Code: 140000 AIR BAGS Multiple Failure: 1

FAILED COMPONENT(S)/PART(S) INFORMATION

Incident Date(s): 4 different times Failure Mileage: 50000 Failure Speed: 30-35 miles

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: At Stop Light Signs
Tire Component Code: _____ Tire 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: _____ Number of Deaths: _____ Reported to Police: Y

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; (e.g., parts repaired or replaced (and if old part is available)).

WHILE WAITING FOR A RED LIGHT TO CHANGE TO A GREEN LIGHT, CONSUMER'S VEHICLE WAS INVOLVED IN A REAR END AND SIDE IMPACT ACCIDENT. BOTH IMPACTS WERE ABOUT 35 TO 45 MPH, AND NEITHER OF THE AIR BAGS DEPLOYED. A POLICE REPORT WAS ISSUED. *PH
They had to fix my CD player 2 different times & they didn't rewired speaker right to my door high in front & falls out & drops down when I AM driving. AS HARD AS I WAS hit I wonder they may NOT HAVE installed

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

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 responses 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.

Any at the time my car was manufactured

Narrative Description of Incident(s), Failure(s), Crash(es), and Injury(ies)

I WAS HIT IN THE REAR END BY TWO OTHER CARS
TRUNK OF A CAR THE FIRST AT A STOP LIGHT I STOP
PED THEY DIDNT THEY HIT ME AT ABOUT 30 MILES
PER HOUR
I WAS STOP AT A STOP LIGHT A GIRL DIDNT
STOP HIT ME IN MY BUMPER AT ABOUT
30 MILES PER HOUR

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



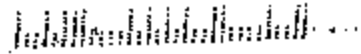
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NECESSARY
IF MAILED
IN THE
UNITED STATES

BUSINESS REPLY MAIL

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POSTAGE WILL BE PAID BY NATL. HWY. TRAFFIC SAFETY ADMIN.

U.S. Department of Transportation
National Highway Traffic Safety Administration
Office of Defects Investigation, NVS-216
400 7th Street, SW
Washington, DC 20590



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