



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 100145

Date Received

30-APR-2004

Repository ☐

Reference No.
10071945

OWNER INFORMATION (Type or Print)

Name

Address

City

POINT PLEASANT

State ND

Zip Code

Daytime Telephone Number

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 4/30/04

VEHICLE INFORMATION

17 digit Vehicle Identification Number located at bottom of windshield on driver's side

Make

NISSAN

Model

ALTIMA

Model Year

2002

Date Purchased

Dealer's Name and Telephone Number

Engine

No. Cylinders

Fuel Type:

Original Owner

Dealer's City

State

Zip Code

Transmission Type

☐ Antilock Brakes

Powertrain

☐ Cruise Control

Vehicle Component Code

140000 AIR BAGS

Multiple Failures: 1

FAILED COMPONENT(S)/PART(S) INFORMATION

Incident Date(s)

29-APR-2004

Failure Mileage

60000

Failure Speed

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

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(es).)

Crash

☐ Yes ☒ No

Fire

☐ Yes ☒ No

Number of Persons Injured

Number of Deaths

Reported to Police

0

0

N

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

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).

THE DEALER REFUSES TO HONOR THE VEHICLE'S RECALL (RECALL NO. 03V061000) REGARDING ON DRIVER SIDE AIR BAGS INFLATOR MODULE. DEALER STATED THAT THE FRONT OXYGEN SENSOR NEEDS TO BE REPAIRED FIRST. THE CAUSE HAS YET TO BE DETERMINED. *LA

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 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.

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

THE DEALER IS NOT TELLING YOU THE TRUTH.
I TOOK THE CAR TO THE DEALER FOR 4 RECALLS, AND WAS TOLD THE
RECALLS COULD NOT BE DONE WITHOUT REPLACING THE FRONT O₂ SENSOR.
HE TRIED TO TALK ME INTO PAYING ONLY \$183 FOR THE O₂ SENSOR WHICH
HE LUCKILY HAD ON HAND. HE THOUGHT HE COULD SELL ME THE O₂ SENSOR
AND I DIDN'T KNOW THAT 3 OF THE RECALLS COULD BE DONE
WITHOUT REPLACING THE O₂ SENSOR. BY THE LOOK ON HIS FACE, HE
WAS SHOCKED WHEN I TOLD, I WAS THERE FOR THE RECALL WORK ONLY
AND THAT I WOULD HAVE MY OWN MECHANIC REPLACE THE O₂ SENSOR.
I REALIZE THAT DEALERS ARE IN BUSINESS TO MAKE MONEY AND HAVE
A PROBLEM TELLING THE TRUTH; I ACCEPT THIS.
THE BOTTOM LINE IS, THE RECALL PROGRAM SHOULD NOT BE USED AS A
MEANS FOR THE DEALER TO BILK CAR OWNERS.

ATTACH ADDITIONAL SHEETS IF NECESSARY

U.S. Department
of Transportation

National Highway
Traffic Safety
Administration

490 Seventh St., S.W.
Washington, D.C. 20590

Official Business
Penalty for Private Use \$300



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, NVS-216
400 7th Street, SW
Washington, DC 20590



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and dial toll free at

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(DASH) 2 DOT



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