



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 100216

Date Received

2004 OCT 29
08-SEP-2004

Repository

Reference No. 26
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OWNER INFORMATION (Type or Print)

Name [Redacted]
Address [Redacted]
City LUTZ State FL Zip Code [Redacted]

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 [Redacted] Date 9/20/04

VEHICLE INFORMATION

17 digit Vehicle Identification Number Located at bottom of windshield on driver's side
JN1A234E547 [Redacted] Make NISSAN Model 3502 Model Year 2004

Date Purchased March 6 2004 Dealer's Name and Telephone Number Ferman Nissan Engine: No. Cylinders 6 Fuel Type:

Original Owner Dealer's City Tampa, Florida State FL Zip Code 33612

Transmission Type AUTOMATIC Andlock Brakes Cruise Control Powertrain Vehicle Component Code 073200 FUEL SYSTEM, GASOLINE:FUEL INJECTION SYSTEM:INJECT Multiple Failure: 1

FAILED COMPONENT(S)/PART(S) INFORMATION

Incident Date(s) 01-SEP-2004 Failure Mileage Failure Speed

ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A TIRE FAILURE

Tire Make Tire Model (Name or Number) Tire Size (Example P215/85R15)
DOT No. (Example: DOTM1A9ABC038) 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(ies).)

Crash Yes No Fire Yes No Number of Persons Injured 0 Number of Deaths 0 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).

WHILE DRIVING AT ANY SPEED VEHICLE JERKED AND VIBRATED UNCONTROLLABLY. CONSUMER WAS ABLE TO MAINTAIN CONTROL OF THE VEHICLE, AND DROVE IT TO THE DEALER FOR INSPECTION. MECHANIC DETERMINED THAT FUEL INJECTORS NEEDED TO BE REPLACED. *AK

Car idling roughly when cold or warm

Include, if available: Police/Fire Department Reports, Photos, and Repair Invoice. 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 substantial summary thereof, may be used in support of the agency's action.

THE ATTACHMENTS TO THIS
DOCUMENT HAVE BEEN REMOVED
TO PROTECT UNWARRANTED
INVASION OF PERSONAL PRIVACY
PURSUANT TO EXEMPTION 6 OF
THE FREEDOM OF INFORMATION
ACT (FOIA), 5 U.S.C. 552(b)(6).