



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 100148

Date Received

Repository ☐

50 JUN 2005

Reference No.
10127114

OWNER INFORMATION (Type or Print)

Name [REDACTED]
Address [REDACTED]
City **MARYVILLE** State **TN** Zip Code [REDACTED]

Daytime Telephone Number

E-mail Address

Evening Telephone Number

Do you authorize NHTSA to compile a copy of this report to the manufacturer of your vehicle? ☒ YES ☒ NO
In the absence of your name or address to the vehicle manufacturer.
Signature of Owner [REDACTED] Date **7/3/05**

VEHICLE INFORMATION

17 digit Vehicle Identification Number Located at bottom of windshield on driver's side
JNKBF01A84M Make **INFINITI** Model **Q45** Model Year **2004**
Date Purchased **01-MAY-04** Dealer's Name and Telephone Number **HARPER INFINITI** Engine: No. Cylinders **8** Fuel Type: **Gas**
Original Owner ☒ Dealer's City **MARYVILLE** State **TN** Zip Code **37923**
Transmission Type ☒ Antilock Brakes Powertrain **REAR WHEEL DRIVE** Vehicle Component Code **185000 VEHICLE SPEED CONTROL: CRUISE CONTROL**
AUTOMATIC ☒ Cruise Control Multiple Failure: **8 or more**

FAILED COMPONENT(S)/PART(S) INFORMATION

Incident Date(s) **01-MAY-2005** Failure Mileage **1000** Failure Speed **OVER 70** **I.C.C. CRUISE CONTROL**
? **And other**

ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A TIRE FAILURE

Tire Make **DOT MALS ABC036** Tire Model (Name or Number) **Original Equipment** Tire Size (Example P215/65R15)
? ☐ 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

(If more than one incident, please specify, if necessary, Crash(es), and Injury(es).)

Crash ☐ Yes ☒ No Fire ☐ Yes ☒ No Number of Persons Injured **?** Number of Deaths **?** 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).

DT: THEY HAVE A CRUISE CONTROL THAT HAS A CHIP THAT IF A CAR GETS TOO CLOSE TO IT SLOWS DOWN. WHEN DRIVING ON THE
HIGHWAY AND SOMEBODY CUTS CONSUMER OFF IT FEELS LIKE SOMEONE STEPPED ON THE BRAKE DUE TO ABRUPT DROP IN SPEED.
CONTACTED MANUFACTURER, THEY SAID CAN'T SEPARATE THEM BECAUSE IT ONLY SHUTS DOWN CRUISE CONTROL OR IT GOES INTO THE
ICC. THE DEALERSHIP SAYS THEY'VE HAD MANY COMPLAINTS, BUT MANUFACTURER SAYS IT IS NOT. *AK

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)

While driving AT high speeds with ICC on and someone cuts in front of you to fast. ICC Kicks in and car slows down very fast. If some one is behind you they do NOT see Break lights or know you are slowing down. I have almost been rear ended 6 or 7 times.

you can NOT turn off ICC and still use your Cruise Control on this model. But on others like the M series you can.

While going around a curve in left lane something in the right lane will activate the ICC also. ATTACH ADDITIONAL SHEETS IF NECESSARY

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400 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

NO POSTAGE
NECESSARY
IF MAILED
IN THE
UNITED STATES



**VEHICLE
OWNER'S**

QUESTIONNAIRE

DOT AUTO SAFETY HOTLINE

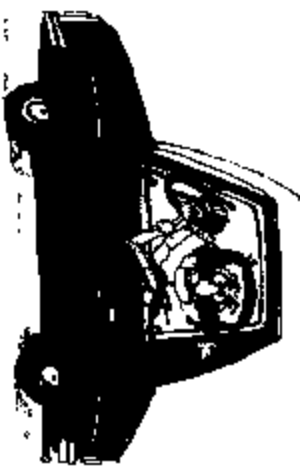
TO REPORT VEHICLE SAFETY DEFECTS
COMPLETE THIS FORM
OR

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and dial toll free at

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