



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

12-OCT-2006

Repository

Reference No.
10170633

OWNER INFORMATION (Type or Print)

Name [REDACTED]
 Address [REDACTED]
 City KIHEI State HI 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 [REDACTED] Date 10/31/06

VEHICLE INFORMATION

17 digit Vehicle Identification Number Located at bottom of windshield on driver's side: JN1CA21DX [REDACTED]
 Make: NISSAN Model: MAXIMA Model Year: 1997
 Date Purchased: 11/98 Dealer's Name and Telephone Number: [REDACTED]
 Engine: No: Cylinders 6 Fuel Type: Gas
 Original Owner: Dealer's City: [REDACTED] State: OR Zip Code: 97130
 Transmission Type: AUTOMATIC Antilock Brakes Cruise Control
 Powertrain: [REDACTED] Vehicle Component Code: 110000 ELECTRICAL SYSTEM
 Multiple Failure: 300

FAILED COMPONENT(S)/PART(S) INFORMATION

Incident Date(s): 30-AUG-2006 Failure Mileage: 94000 Failure Speed: [REDACTED]

ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A TIRE FAILURE

Tire Make: [REDACTED] Tire Model (Name or Number): [REDACTED] Tire Size (Example P215/65R15): [REDACTED]
 DOT No. (Example: DOTM19ABC036): [REDACTED] Original Equipment Prior Repair Failure Location: [REDACTED]
 Tire Component Code: [REDACTED] Tire Failure Type: [REDACTED]

ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A CHILD SEAT FAILURE

Make: [REDACTED] Date Manufactured: [REDACTED] Model No./Name: [REDACTED]
 Seat Type: [REDACTED] Installation System: [REDACTED]
 Child Seat Component Code: [REDACTED] Failed Part: [REDACTED]

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: [REDACTED] Number of Deaths: [REDACTED] 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*: THE CONTACT STATED WHILE DRIVING VARIOUS SPEEDS, THE VEHICLE STALLED HOWEVER IT WOULD RESTART. THIS HAD OCCURRED SINCE THE VEHICLE WAS PURCHASED. IT WAS TAKEN TO A DEALER WHO COULD NOT DETERMINE THE CAUSE OF THE PROBLEM. THERE HAVE BEEN SEVERAL REPAIRS TO THE VEHICLE INCLUDING THE REPLACEMENT OF THREE OXYGEN SENSORS, THE ALTERNATOR AND STARTER. THERE WAS A RECALL #02V171000 PERTAINING TO THE ELECTRICAL SYSTEM. THE VEHICLE WAS NOT INCLUDED IN THE RECALL DUE TO THE VIN.

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 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)

I dont have copies of repair work that have fixed the problem. Every time I go they say its something different & I fix or replace that item & then the same problem keeps happening. I have copies of everything I've done to that car just let me know if you need them. Thank you.

P.S. my car was in storage for almost 3 years, thats why you havent heard from me sooner

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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08 DEC 2005 PM 1 T

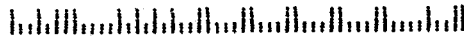
HAPPY HOLIDAYS
NO POSTAGE NECESSARY IF MAILED IN THE UNITED STATES

BUSINESS REPLY MAIL
FIRST CLASS PERMIT NO 73173 WASHINGTON, D.C.

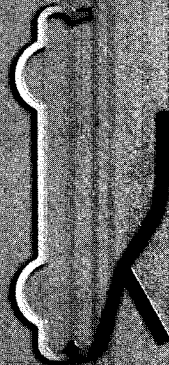
POSTAGE WILL BE PAID BY NATL. HWY. TRAFFIC SAFETY ADMIN.

U.S. Department of Transportation
National Highway Traffic Safety Administration
Office of Defects Investigation, NVS-210
400 7th Street, SW
Washington, DC 20590

20590+0000



Think your vehicle has a safety defect?



**If so:
Use the enclosed form to file a report.**

**or visit:
www.safercar.gov**

**or call:
Vehicle Safety Hotline
888-327-4236**



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