



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

AM 7:27
09-OCT-2007

Repository

Reference No.
10205277

OWNER INFORMATION (Type or Print)

Name

Address

City

CAPECORAL

State

FL

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? [X] YES [] NO
In the absence of an authorization, NHTSA WILL NOT provide your name or address to the vehicle manufacturer.

Signature of Owner Date

VEHICLE INFORMATION

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

JN1AS4406SW

Make

NISSAN

Model

240SX

Model Year

1995

Date Purchased
01-JAN-99

Dealer's Name and Telephone Number

Engine:

No: Cylinders

Fuel Type:

Gas

Original Owner

Dealer's City

State

Zip Code

Transmission Type

MANUAL

[X] Antilock Brakes

[X] Cruise Control

Powertrain

REAR WHEEL DRIVE

Vehicle Component Code

140000 AIR BAGS

Multiple Failure: 1

FAILED COMPONENT(S)/PART(S) INFORMATION

Incident Date(s)

01-JAN-2001

Failure Mileage

20000

Failure Speed

0

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:

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 [X] No

Fire

[] Yes [X] 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).

TL*THE CONTACT OWNS A 1995 NISSAN 240SX. THE AIR BAG CONTROL MODULE WAS DEFECTIVE AND THE LIGHT BEGAN FLASHING A FEW YEARS AGO. THE VEHICLE WAS TAKEN TO THE DEALER AND THEY STATED THAT THE LIGHT DID NOT AFFECT THE FUNCTIONALITY OF THE AIR BAGS. RECENTLY, THE VEHICLE WAS TAKEN TO A MECHANIC AND HE STATED THAT THE AIR BAGS WOULD NOT WORK IN A CRASH BECAUSE THE AIR BAG LIGHT WAS ILLUMINATED. THE ENGINE SIZE AND NUMBER OF CYLINDERS WERE UNKNOWN. THE CURRENT MILEAGE WAS 90,000 AND FAILURE MILEAGE WAS 20,000.

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.