



U.S. Department of Transportation
National Highway Traffic Safety Administration

DOT Auto Safety Hotline

Vehicle Owner's Questionnaire

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: 10-NOV-2008
Repository:
Reference No.: 10248340

OWNER INFORMATION (Type or Print)

Name: _____
Address: _____
City: CONCORD State: CA 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: ____/____/____

VEHICLE INFORMATION

17 digit Vehicle Identification Number Located at bottom of windshield on driver's side: JN1CA21D6T
Make: NISSAN Model: MAXIMA Model Year: 1996
Date Purchased: _____ Dealer's Name and Telephone Number: _____ Engine: _____ Fuel Type: _____
Original Owner: Dealer's City: _____ State: _____ Zip Code: _____ No: Cylinders: _____
Transmission Type: _____ Antilock Brakes: Powertrain: _____ Multiple Failure: _____ Incident Date(s): 11-MAY-2007
Cruise Control:

FAILED COMPONENT(S)/PART(S) INFORMATION

Vehicle Component Code: 140000 AIR BAGS Failure Mileage: 75000 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: DOTM9ABC036): _____ Original Equipment: Failure Location: _____
Prior Repair:
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).

TL*THE CONTACT OWNS A 1996 NISSAN MAXIMA. THE CONTACT STATED THAT THE AIR BAG INDICATOR CONSTANTLY FLASHED ON THE INSTRUMENT PANEL. SHE TOOK THE VEHICLE TO THE DEALER AND PAID \$125 FOR AN ESTIMATE. THE DEALER STATED THAT THE FAILURE WAS INCAPABLE OF BEING REPAIRED. IN THE SUMMER OF 2007, THE MANUFACTURER STATED THAT THEY WOULD NOT ASSIST IN REPAIRING THE FAILURE. THE CURRENT MILEAGE WAS APPROXIMATELY 84,000 AND FAILURE MILEAGE WAS APPROXIMATELY 75,000.

11/15/08 please see all attachments,
Thank you
Mrs. _____

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.

of Transportation
National Highway
Traffic Safety
Administration

To Report Vehicle Safety Defects
1-888-DASH-2-DOT
(1-888-327-4236)
INTERNET: www.nhtsa.dot.gov/hotline

06-AUG-2007

Reference No.
10198673

OWNER INFORMATION (Type or Print)

Name _____
Address _____
City CONCORD State CA 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 release your name or address to the vehicle manufacturer.
Signature of Owner _____ Date 08/11/2007

VEHICLE INFORMATION

17 digit Vehicle Identification Number Located at bottom of windshield on driver's side: JN1CA21D6T
Make: NISSAN Model: MAXIMA Model Year: 1996
Date Purchased: 6/17/1996 Dealer's Name and Telephone Number: DIRITO BROS - NISSAN CONCORD
Engine: No: Cylinders 6 Fuel Type: Gas
Original Owner: Dealer's City: CONCORD, CA State: CA Zip Code: 94520
Transmission Type: AUTOMATIC
 Antilock Brakes Cruise Control
Powertrain: FRONT WHEEL DRIVE
Vehicle Component Code: 140000 AIR BAGS
Multiple Failure: 1

FAILED COMPONENT(S)/PART(S) INFORMATION

Incident Date(s): 03-JUL-2007 Failure Mileage: 75000 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 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).

TL*THE CONTACT OWNS 1996 NISSAN MAXIMA. SHE STATED THAT THE AIR BAG LIGHT FLASHED AT ALL TIMES. THE DEALER STATED THAT THE VEHICLE NEEDED A NEW AIR BAG SYSTEM. THE CONTACT ALSO STATED THAT THERE WAS A LEAK ON THE POWER STEERING PUMP. THE FAILURE MILEAGE WAS 75,000 AND THE CURRENT MILEAGE WA 75,900. ALSO THE BOSE RADIO (FOR WHICH WAS \$1000 extra cost) NOW IS OUT OF ORDER. PRICES QUOTED BY DIRITO BROS. for repairs are AIR BAG \$1200 + PUMP \$800 + radio estimate \$315.00 total \$2315.00 NONE OF WHICH HAS TO DO WITH CARELESS DRIVING.

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.

CONCORD, CA.

Nissan Corporate Office

Pleasanton, Ca.
Attn. Service Manager

August 12, 2007

I am writing to you because I have problems with my Nissan Maxima of 1996, which I did not expect at all. I am the original purchaser of this vehicle, it was a deluxe version of Maxima in 1996 with leather interior, sun roof, Bose radio fully equipped, etc.

My VIN # JN1CA21D6T1 This vehicle was kept as per request, regular oil changes also servicing as was prescribed. I am a women, driving moderately. My mileage at this point is 75900. a while back a red light showed up saying : Air Bag and it has been flashing ever since.

I took the car to Dirito Bros. Nissan in Concord, Ca. Thinking that it is a repairable item, after I paid \$125 estimate charge I was told that this is not repairable, but need a new system approx. \$1200 and the estimate charge will not be part of it, needless to say I did not have it repaired.

Having an oil change done, I was told by the same Company that I am losing some of power steering fluid and the car has developed a leak in the pump, other \$800 estimate, also my Bose radio started to stop and go, (most of the time dead) no one would want to work on it except Dirito Bros. Would send it out, other \$315 estimate charge.

I realized my car is 11 years old, but none of the items above are wear and tear, the car was never abused. I think the air bag specially is a safety item and I never had it open and I am writing to you hoping that someone will help to take care of this problem at least.

Please try to consider all of the above, and help solving my problem.

Thank you for your time

Copy to: Dirito Bros. Concord, Ca.

11/15/2008
I read in the paper that Nissan had a recall "Because Air Bag malfunctions", this proves that this problem existed before and no consumer should be penalized for their work done.
Thank you.

6746918

214781

INVOICE



1290 CONCORD AVENUE · CONCORD, CA 94520
(925) 676-4400
dirito.com

CONCORD, CA
HOME:

PAGE 1

BUS:

SERVICE ADVISOR: 3035 AL KOHL

COLOR	YEAR	MAKE/MODEL	VIN	LICENSE	MILEAGE IN / OUT	TAG
GOLD	96	NISSAN MAXIMA	JN1CA21D6TT		71928/71928	
DEL. DATE	PROD. DATE	WARR. EXP.	PROMISED	PO NO.	PAY	INV. DAT.
17JUN96 IS			18:00 18DEC06		CASH	18DEC06
10:57 18DEC06		11:53 18DEC06		OPTIONS: STK:6N0807 DLR:		TRN:AUTO

LINE	OPCODE	TECH	TYPE	HOURS	LIST	NET	TOTAL
A CUSTOMER STATES THAT THE AIR BAG LIGHT IS ON CHECK AND REPORT							
10		ELECTRICAL					
		3060	CP			125.00	125.00

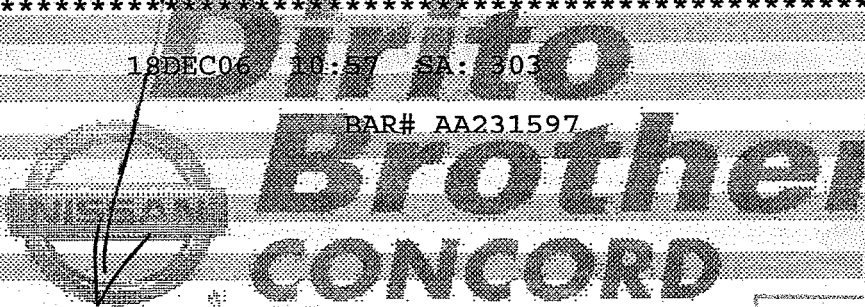
DID TESTING AND FOUND HAS A SHORTED AIR BAG CON TROL UNIT EST \$1062.00 MORE HAS TO BE SPECAIL ORERED

B CHECK THE ANTENNA MAST WILL NOT GO DOWN

LINE	OPCODE	TECH	TYPE	HOURS	LIST	NET	TOTAL
10		ELECTRICAL					
		3060	CP			0.00	0.00
NEEDS NEW MAST EST \$168.00 NEEDS NEW STARTER IS RUNNING ON EST \$392.00							

EST: 125.00 18DEC06 10:57 SA: 3035

BAR# AA231597



DIRITO BROTHERS CONCORD4
1290 CONCORD AVENUE
CONCORD, CA 94520
925-676-4400
5436845555151629

COPY
12/18/2006 13:00:27
Sale:

Transaction # ?
Card Type VISA
Acc: *****
Entry: Swiped
Invoice # 6543
Total: 125.00
Reference No.: 15776591
Response: 017569



I acknowledge receipt of vehicle and have received a copy of this invoice.

X
Customer Signature

Thank You For Your Business!

DESCRI
LABOR AMOU
PARTS AMOU
GAS, OIL, LUI
SUBLET AMOI
MISC. CHARG
TOTAL CHARI
LESS INSURAI
SALES TAX
PLEASE PAY THIS AMOU

CUSTOMER COPY

THANK YOU!



U.S. Department
of Transportation
**National Highway
Traffic Safety
Administration**

1200 New Jersey Avenue SE
Washington, DC 20590

Dear Consumer:

NVS-216cg

As a result of your report to the Vehicle Safety Hotline (VSH), we have recorded that report on the enclosed Vehicle Owner's Questionnaire (VOQ) form. Please review the form and make changes, additions and corrections as necessary. Additionally, please provide a more detailed description of the failures(s) you reported that you believe relevant to safety. Also, if available, include copies of repair invoices, letters to the manufacturer, or any other document related to the problem(s) you reported. If a crash or fire occurred, include a copy of the police or fire department report.

It is helpful to be as thorough as possible in your report so that our ability to use your report will be maximized. If you do not have the information, it is not necessary to complete all the boxes. However, it is very difficult to identify the scope of a vehicle problem unless the vehicle identification number (VIN) is known. The VIN is located inside the vehicle on the dashboard adjacent to the left (driver's side) of the windshield pillar and on the drivers' door or the drivers door jam. It may also be listed on the dealer's repair invoices. When reporting a tire problem, the brand name, tire name and complete tire size should be included. If possible also provide the DOT tire identification number. It is usually located near the rim flange of the tire on either side of the tire.

The Privacy Act prohibits our agency from identifying you to the manufacturer without your permission. If you wish to give us that permission, please mark the appropriate authorization box and sign the form to allow us to provide your name to the manufacturer. The information you provide may assist the manufacturer and NHTSA in determining if a safety-related defect exists.

Any information provided is entirely voluntary. There is no consequence or penalty of any kind if you do not wish to provide it. We seek this information to develop both statistical and investigative evidence that will help identify potential safety related problems in vehicle or vehicle equipment, e.g., tires, child safety seats, jacks, etc.

When completed, please fold and staple or tape the form so that the pre-addressed portion of the form is on the outside. If a larger envelope is used, tape the VOQ form to the larger envelope so that the pre-addressed portion of the form is showing.

If further assistance is needed, please contact the VSH at their toll-free number, 1-888-327-4236.
Thank you for your cooperation.

Sincerely,

*Nissan Corporate office
P. O. Box 685003
Franklin, Tenn. 37064*

Kathleen C. DeMeter
Director
Office of Defects Investigation
Enforcement

Enclosure: VOQ

8/15/2007
Mr. Jackson
NHTSA
www.nhtsa.gov

*Returned
8/12/2007
see attachment*