



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

16-MAR-2009

Repository ☐

Reference No.

10261974

OWNER INFORMATION (Type or Print)

Name

Address

City

OAK CREEK

State

WI

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?
In the absence of a Signature of Owner provide your name or address to the vehicle manufacturer. ☒ YES ☒ NO
Date 3/19/09

VEHICLE INFORMATION

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

5N1AR18W95C

Make

NISSAN

Model

PATHFINDER

Model Year

2005

Date Purchased

2005

Dealer's Name and Telephone Number

Rosen Nissan 414-282-9300

Engine:

No: Cylinders

Fuel Type:

Original Owner

☒

Dealer's City

Milwaukee

State

WI

Zip Code

53221

Transmission Type

Automatic

☒ Antilock Brakes

☒ Cruise Control

Powertrain

Multiple Failure:

Incident Date(s)

10-FEB-2009

FAILED COMPONENT(S)/PART(S) INFORMATION

Vehicle Component Codes: 080000 FUEL SYSTEM, DIESEL, 060000 ENGINE AND ENGINE COOLING

Failure Mileage

53987

Failure Speed

20

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
☐ 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 A 2005 NISSAN PATHFINDER. WHILE DRIVING 20 MPH, THE CONTACT NOTICED THAT THE FUEL GAUGE INDICATOR ILLUMINATED, WHICH MEANT THAT THERE WAS NO GASOLINE IN THE TANK. HOWEVER, SHE HAD RECENTLY FILLED UP THE VEHICLE WITH FUEL. THE VEHICLE WAS TAKEN TO A LOCAL REPAIR SHOP AND IT WAS DETERMINED THAT THE FUEL SENSOR FAILED. THE FUEL SYSTEM SENSOR WAS RESET. A COUPLE OF WEEKS LATER, WHILE ACCELERATING FROM A STOP, THE VEHICLE SHUT OFF. THE CONTACT WAS ABLE TO SHIFT INTO PARK AND RESTART THE VEHICLE. WHEN THE VEHICLE WAS RESTARTED, THE CONTACT NOTICED THAT THE SERVICE ENGINE INDICATOR WAS ILLUMINATED. THE VEHICLE HAS NOT BEEN INSPECTED BY A TECHNICIAN TO DETERMINE THE CAUSE OF THE FAILURE. THE MANUFACTURER WOULD NOT PROVIDE COMPENSATION BECAUSE THERE WERE NO RECALLS AVAILABLE. THE FAILURE AND CURRENT MILEAGES WERE 53,987.

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)

Fuel level sensor failed several times. Vehicle shut off while I was accelerating after a stop at a red light, and service engine soon light came on.

ATTACH ADDITIONAL SHEETS IF NECESSARY

U.S. Department
of Transportation

**National Highway
Traffic Safety
Administration**

1200 New Jersey Avenue SE.
Washington, D.C. 20077-9382

Official Business
Penalty for Private Use \$300

MILWAUKEE WI 532

02 APR 2009 PM 8 L

LET US DRIVE TO AHEAD

THINK, SPEAK AND WRITE

John Adams, 1765

powerofthefirst.com

NO POSTAGE
NECESSARY
IF MAILED
IN THE
UNITED STATES

BUSINESS REPLY MAIL

FIRST-CLASS MAIL

PERMIT NO. 1888

WASHINGTON, DC

POSTAGE WILL BE PAID BY ADDRESSEE

**US Department of Transportation
National Highway Traffic Safety Administration
Office of Defects Investigation, NVS-210
1200 New Jersey Avenue SE.
Washington, D.C. 20077-9382**

20077-9382



**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**



Vehicle Owner's Questionnaire (VOQ)
U.S. Department of Transportation
National Highway Traffic Safety Administration

Safercar.gov



Invoice

Date	Invoice #
3/22/2009	A5845

Phone: (414) 761-0500 Fax: (414) 761-0185
3012 W. Ryan Road • Franklin, WI 53132

Bill To

Ochs Auto Body, Wi 761-3146
Larry Rick

P.O. No.	YEAR	MAKE - MODEL	ENGINE	MILEAGE	VIN NUMBER	LICENSE PLATE	UNIT #
	2005	Nissan Pathfinder	4.0	54028	SC		
Description				V	Qty	Rate	Amount
Accelerator Pedal Sensor Assembly				DR		164.00	164.00
Computer Scan & Test						84.00	84.00
Labor R&R Sensor & Retest						80.00	80.00
Fuel sensor still will need to be replaced							

CUSTOMER AUTHORIZATION

Motor vehicle repair practices are regulated by chapter ATCP 132, Wis. Adm. Cod, administered by the Bureau of Consumer Protection, Wisconsin Dept. of Agriculture, Trade and Consumer Protection, P.O. Box 8911, Madison, Wisconsin 53708-8911.

Having authority to do so, I hereby order the above products and services, parts and labor and grant permission to you and/or your employees to operate the vehicle described for the purpose of testing and/or inspection. It is understood the final invoiced price on estimates exceeding \$100.00 will not exceed the estimate by more than 10% without my approval. I agree to pay cash when the work is completed or to pay on other terms satisfactory to you. Until paid in full, the amount owing on this work shall constitute a lien on the motor vehicle. If collection is made by suit or otherwise. I agree to pay storage and collection and reasonable attorney's fees.

CUSTOMER SIGNATURE

Subtotal \$328.00

Sales Tax (0.0%) \$0.00

Total \$328.00

Payments/Credits \$0.00

Balance Due \$328.00