



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

DOT Auto Safety Hotline

Vehicle Owner's Questionnaire

Call 2:21 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

18-JUN-2009

Repository

Reference No.

10274261

OWNER INFORMATION (Type or Print)

Name

BOB BROELEN

Address

[REDACTED]

City

HUNTINGTON

State

VT

Zip Code

[REDACTED]

Daytime Telephone Number

Evening Telephone Number

E-mail Address

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 6/18/09

VEHICLE INFORMATION

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

JN1CA21D4VT [REDACTED]

Make

NISSAN

Model

MAXIMA

Model Year

~~2006~~
1997

Date Purchased

AUG 1997

Dealer's Name and Telephone Number

FREEDOM NISSAN 1-800-888-9133

Engine:

No: Cylinders 6

Fuel Type:

GAS

Original Owner

Dealer's City

SO. BURLINGTON

State

VT

Zip Code

05403

Transmission Type

STANDARD

Antilock Brakes

Cruise Control

Powertrain

Multiple Failure:

WARNING LIGHT
REAR SENSOR

Incident Date(s)

~~15 AUG 1997~~
1998
1999

FAILED COMPONENT(S)/PART(S) INFORMATION

Vehicle Component Codes: 030000 SERVICE BRAKES, HYDRAULIC; 036000 SERVICE BRAKES, HYDRAULIC;

ANTILOCK

REAR SENSOR FAILURES AT 20,000 TO 25,000 MILES

Failure Mileage

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 A ~~2007~~ NISSAN MAXIMA. THE CONTACT STATED THAT THE ABS ACTIVATES ON ITS OWN SPORADICALLY. THE DEALER SPECULATED THAT DIRT OR MUD ENTERS THROUGH THE WHEEL SPEED SENSOR AND CAUSES THE FAILURE. THE DEALER CLEANED THE COMPONENT, BUT THE FAILURE RECURRED SHORTLY AFTER THE REMEDY. THE CONTACT WENT BACK TO THE DEALER AND THEY REPAIRED THE VEHICLE. THE FAILURE AND CURRENT MILEAGES WERE UNKNOWN.

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.