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|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------|--------------------------------------------------------------------------------------|-------------------|----------------------------------------------------|--------------------------------|-------------------------------------|
|  <b>DOT Auto Safety Hotline</b><br><b>Vehicle Owner's Questionnaire</b><br><b>To Report Vehicle Safety Defects</b><br><b>1-888-DASH-2-DOT</b><br><b>(1-888-327-4236)</b><br><b>INTERNET:www.nhtsa.dot.gov/hotline</b>                                                                                                                                                                                                                                                                              |                                                                     |                                                                                      |                   | <b>FOR AGENCY USE ONLY 100148</b>                  |                                |                                     |
| U.S. Department of Transportation<br>National Highway Traffic Safety Administration                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                                                                     |                                                                                      |                   | Date Received<br><b>JAN 23 2012</b><br>30-DEC-2011 |                                | Repository <input type="checkbox"/> |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                                                     |                                                                                      |                   |                                                    |                                | Reference No.<br>10441746           |
| <b>OWNER INFORMATION (Type or Print)</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                                                                     |                                                                                      |                   |                                                    |                                |                                     |
| Name                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                     |                                                                                      |                   | Daytime Telephone Number                           |                                | E-mail Address                      |
| Address                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                                                     |                                                                                      |                   |                                                    |                                |                                     |
| City                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                     | State                                                                                | Zip Code          | Evening Telephone Number                           |                                |                                     |
| BUZZARD BAY                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                                                                     | MA                                                                                   |                   |                                                    |                                |                                     |
| The information you provide will be used to identify potential safety-related defects. We may share your information with the applicable vehicle manufacturer during an investigation or recall in accordance with the routine uses described in the agency's Privacy Act notice. See 49 FR 53971 (Sep. 3, 2004).                                                                                                                                                                                                                                                                   |                                                                     |                                                                                      |                   |                                                    |                                |                                     |
| <b>VEHICLE INFORMATION</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                                                                     |                                                                                      |                   |                                                    |                                |                                     |
| 17 digit Vehicle Identification Number Located at bottom of windshield on driver's side                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                                                     |                                                                                      |                   | Make                                               | Model                          | Model Year                          |
| JN8AZ08W64W                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                                                                     |                                                                                      |                   | NISSAN                                             | MURANO                         | 2004                                |
| Date Purchased                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                                                     | Dealer's Name and Telephone Number                                                   |                   |                                                    | Engine:                        | Fuel Type:                          |
| 9-30-2004                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                                                     | Showcase Nissan 508 759-4400                                                         |                   |                                                    | No: Cylinders                  |                                     |
| Original Owner                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                                                     | Dealer's City                                                                        |                   | State                                              | Zip Code                       |                                     |
| <input checked="" type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                                                                     | Bourne, Mass                                                                         |                   | Mass                                               | 02532                          | Six Gas                             |
| Transmission Type                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | <input checked="" type="checkbox"/> Antilock Brakes                 | Powertrain                                                                           | Multiple Failure: |                                                    | Incident Date(s)               |                                     |
| CVT                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | <input checked="" type="checkbox"/> Cruise Control                  |                                                                                      |                   |                                                    | 01-OCT-2011                    |                                     |
| <b>FAILED COMPONENT(S)/PART(S) INFORMATION</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                                                     |                                                                                      |                   |                                                    |                                |                                     |
| Vehicle Component Code: 130000 VISIBILITY                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                                                     |                                                                                      |                   |                                                    | Failure Mileage                | Failure Speed                       |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                                                     |                                                                                      |                   |                                                    | 158000                         |                                     |
| <b>ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A TIRE FAILURE</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                                                     |                                                                                      |                   |                                                    |                                |                                     |
| Tire Make                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                                                     | Tire Model (Name or Number)                                                          |                   |                                                    | Tire Size (Example P215/65R15) |                                     |
| DOT No. (Example: DOTM19ABC036)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                                                     | <input type="checkbox"/> Original Equipment<br><input type="checkbox"/> Prior Repair |                   | Failure Location:                                  |                                |                                     |
| Tire Component Code                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                                                                     |                                                                                      |                   | Tire Failure Type:                                 |                                |                                     |
| <b>ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A CHILD SEAT FAILURE</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                                                                     |                                                                                      |                   |                                                    |                                |                                     |
| Make:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                                                     | Date Manufactured:                                                                   |                   | Model No./Name:                                    |                                |                                     |
| Seat Type:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                                                                     | Installation System:                                                                 |                   |                                                    |                                |                                     |
| Child Seat Component Code:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                                                                     | Failed Part:                                                                         |                   |                                                    |                                |                                     |
| <b>APPLICABLE INCIDENT INFORMATION</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                                                     |                                                                                      |                   |                                                    |                                |                                     |
| (Please describe in detail the incident(s), Failure(s), Crash(es), and injury (ies).)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                                                     |                                                                                      |                   |                                                    |                                |                                     |
| Crash                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | Fire                                                                | Number of Persons Injured                                                            |                   | Number of Deaths                                   | Reported to Police             |                                     |
| <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |                                                                                      |                   |                                                    | N                              |                                     |
| Narrative Description of Incident(s), Crash(es), and Injury(ies).<br>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 2004 NISSAN MURANO. THE CONTACT STATED THAT THE SUNVISOR HOLDER HAD A DEFECTED SPRING AND WOULD CONTINUOUSLY FALL AND BLOCK THE CONTACT'S VIEW OF THE ROADWAY WHILE DRIVING. THE VEHICLE WAS NOT TAKEN TO THE DEALER OR REPAIRED. THE FAILURE MILEAGE WAS 158,000 AND THE CURRENT MILEAGE WAS 159,005.                                                                                                                                                                                                                                                       |                                                                     |                                                                                      |                   |                                                    |                                |                                     |
| Include, if available: Police/Fire Department Report, Photos, and Repair Invoice. <span style="float: right;">ATTACH ADDITIONAL SHEETS IF NECESSARY</span>                                                                                                                                                                                                                                                                                                                                                                                                                          |                                                                     |                                                                                      |                   |                                                    |                                |                                     |
| 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. |                                                                     |                                                                                      |                   |                                                    |                                |                                     |