INFORMATION Redacted PURSUANT TO THE FREEDOM OF INFORMATION ACT (FOIA), 5 U.S.C . 552(B)(6)

Form Approved: O.M.B. No. 2127-0008

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	Repository ☐
JUN 21 2013 26-FEB-2013	Reference No. 10500481

OWNER INFORMATION (Type or Print)

Name		Daytime Telephone Number	E-mail Address
Address			
City: STEVENSON	State: MD	Zip Code:	Evening Telephone Number

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).

VEHICLE INFORMATION

17 digit Vehicle Identification Number Located at bottom of windshield on driver's side	Make	Model	Model Year
JN8AZ2NF6D9	INFINITI	QX56	2013

Date Purchased	Dealer's Name and Telephone Number	Engine: No: Cylinders	Fuel Type:
1/10/13	INFINITY - PALM BEACH 561-615 3300	8	HIGH
Original Owner ☐	Dealer's City / State / Zip Code		

Transmission Type	Powertrain	Multiple Failure:	Incident Date(s)
☒ Antilock Brakes ☒ Cruise Control		Yes	12-JAN-2013

FAILED COMPONENT(S)/PART(S) INFORMATION

Vehicle Component Code: 180000 VEHICLE SPEED CONTROL	Failure Mileage	Failure Speed
	2000	10

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: DOTMAL9ABC036)	☐ 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	Fire	Number of Persons Injured	Number of Deaths	Reported to Police
☐ Yes ☒ No	☐ Yes ☒ No	0	0	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 2013 INFINITI QX56. THE CONTACT STATED WHILE DRIVING APPROXIMATELY 10 MPH, THE VEHICLE LOST ACCELERATION POWER. THE CONTACT ALSO STATED THAT THE FAILURE OCCURRED INTERMITTENTLY. THE VEHICLE WAS TAKEN TO THE DEALER FOR DIAGNOSTIC TESTING. THE TECHNICIAN WAS UNABLE TO DIAGNOSE THE FAILURE. THE VEHICLE WAS NOT REPAIRED. THE APPROXIMATE FAILURE MILEAGE WAS 2,000. MAH

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.

6/13/13 **Narrative Description of Incident(s), Failure(s), Crash(es), and Injury(ies)**

AT VARIOUS TIMES THE VEHICLE WILL NOT ACCELERATE AT LOW SPEEDS. MOST NOTABLE WAS ENTERING THE FLORIDA TURNPIKE AND ALMOST BEING HIT [redacted] BY AN 18 WHEEL VEHICLE. FORTUNATELY TO DATE ALL DRIVERS IN BACK OF ME HAVE BEEN ALERT. THE TIME OF NO ACCELERATION LAST APPROX. 2 SECONDS. SINCE 1/10/13 THIS LOSS OF POWER HAS HAPPENED AT LEAST 50 TIMES. THE SERVICE MANAGER AT PALM BEACH INFINITY CAN VERIFY [redacted]

ATTACH ADDITIONAL [redacted] ESSARY

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

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