

INFORMATION ACT (FOIA), 5 U.S.C. 552(B)(6) U.S. Department of Transportation National Highway Traffic Safety Administration		FOR AGENCY USE ONLY 100148	
		Vehicle Owner's Questionnaire To Report Vehicle Safety Defects 1-888-DASH-2-DOT (1-888-327-4236) INTERNET: www.nhtsa.dot.gov/hotline	
OWNER INFORMATION (Type or Print) Name: [REDACTED] Address: [REDACTED] City: MARIETTA State: GA Zip Code: [REDACTED]		Date Received 04-DEC-2015	Repository ☐ Reference No. 10808499
		Daytime Telephone Number [REDACTED]	E-mail Address [REDACTED]
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 1N4AZ0CP7F0 [REDACTED]		Make NISSAN	Model LEAF
Date Purchased		Model Year 2015	
Dealer's Name and Telephone Number		Engine: No: Cylinders	Fuel Type:
Original Owner ☐	Dealer's City	State	Zip Code
Transmission Type ☐ Antilock Brakes ☐ Cruise Control	Powertrain	Multiple Failure:	Incident Date(s) 07-NOV-2015
FAILED COMPONENT(S)/PART(S) INFORMATION			
Vehicle Component Code: BRAKES (PWS)		Failure Mileage 3000	Failure Speed 5
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: DOTM19ABC035)	☐ 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	Number of Deaths
		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 2015 NISSAN LEAF. THE CONTACT STATED THAT WHILE DRIVING AT 5 MPH AND ATTEMPTING TO PARK, THE BRAKE PEDAL WAS DEPRESSED AND TRAVELED TO THE FLOORBOARD CAUSING THE CONTACT TO CRASH INTO A BRICK WALL. THE BRAKES FAILED TO RESPOND. A POLICE REPORT WAS NOT FILED AND THERE WERE NO INJURIES SUSTAINED. THE VEHICLE WAS TAKEN TO THE DEALER WHERE IT WAS TO BE DIAGNOSED AND REPAIRED. THE MANUFACTURER WAS MADE AWARE OF THE FAILURE. THE FAILURE MILEAGE WAS 3,000.			
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.			