



U.S. Department of Transportation

National Highway Traffic Safety Administration

INFORMATION TO CONTACT (FOIA) 5 U.S.C. 552(B)(6)

**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  
 07-SEP-2016  
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**OWNER INFORMATION (Type or Print)**

Name [REDACTED]  
 Address [REDACTED]  
 City GRAFTON State VT Zip Code [REDACTED]

Daytime Telephone Number [REDACTED]  
 Evening Telephone Number

E-mail Address

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  
 1N6ED26Y1Y [REDACTED] Make NISSAN Model FRONTIER Model Year 2000  
 Date Purchased Dealer's Name and Telephone Number Engine: No: Cylinders Fuel Type:  
 Original Owner  Dealer's City State Zip Code  
 Transmission Type  Antilock Brakes Powertrain Multiple Failure: Incident Date(s)  
 Cruise Control 25-AUG-2016

**FAILED COMPONENT(S)/PART(S) INFORMATION**

Vehicle Component Codes: 162000 STRUCTURE: BODY, 060000 ENGINE (PWS), FUEL/PROPULSION SYSTEM (PWS), 250000 ELECTRONIC STABILITY CONTROL Failure Mileage 135000 Failure Speed

**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 Failure Location:  
 Prior Repair  
 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 2000 NISSAN FRONTIER. THE CONTACT STATED THAT THE OIL PAN AND FUEL TANK FAILED DUE TO CORROSION. THE CHECK ENGINE WARNING INDICATOR ILLUMINATED. THE CONTACT ALSO OBSERVED AN ABNORMAL ODOR OF FUEL NEAR THE VEHICLE. THE VEHICLE WAS DIAGNOSED BY A DEALER WHERE IT WAS DETERMINED THAT THE PARTS NEEDED TO BE REPLACED. THE OIL PAN WAS REPLACED, BUT THE FUEL TANK WAS NOT REPLACED. THE MANUFACTURER WAS MADE AWARE OF THE FAILURE AND INFORMED THE CONTACT THAT IT WOULD BE AN OUT OF POCKET EXPENSE TO REPLACE THE FUEL TANK. THE FAILURE MILEAGE WAS APPROXIMATELY 135,000.

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 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.