

INFORMATION ACT (FOIA), 5 U.S.C. 552(B)(6)

DOT Auto Safety Hotline

FOR AGENCY USE ONLY 100148



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

**Vehicle Owner's Questionnaire**  
To Report Vehicle Safety Defects  
1-888-DASH-2-DOT  
(1-888-327-4236)  
INTERNET: www.nhtsa.dot.gov/hotline

Date Received  
06-FEB-2017  
**MAR 15 2017**

Repository   
Reference No.  
10949953

**OWNER INFORMATION (Type or Print)**

Name [REDACTED]  
Address [REDACTED]  
City DANVILLE State KY Zip Code [REDACTED]

Daytime Telephone Number [REDACTED]  
Evening Telephone Number [REDACTED]

E-mail Address [REDACTED]

**VEHICLE INFORMATION**

17 digit Vehicle Identification Number Located at bottom of windshield on driver's side  
JN8AZ1MW3CW [REDACTED]  
Make NISSAN Model MURANO Model Year 2012  
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 30-JAN-2017

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

Vehicle Component Code: 140000 AIR BAGS Failure Mileage 69772 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: 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**

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).

AIR BAG WARNING LIGHT BEGAN FLASHING. INDICATOR LIGHT UNDER HEATING/AIR CONDITION PANEL INDICATED BAG OFF ON PASSENGER SIDE. DIAGNOSTIC SCAN REQUESTED FROM DEALER REVEALED THAT "OCCUPANT SENSOR UNIT FAILED." "RECOMMENDED REPLACEMENT OF PASSENGER AIR BAG SYSTEM AND SENSORS AT A COST OF \$3,563.13." NISSAN CONSUMER AFFAIRS TWICE REJECTED MY REQUEST FOR FINANCIAL SUPPORT FOR REPAIR, "BECAUSE IT WAS NOT LISTED IN THE CAMPAIGN" (RECALL LIST). MILEAGE WAS 69,772. UPDATED 03/16/17\*LJ

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.

FEB. 7, 2017

NHTSA Engineers,

FEB 14 2017

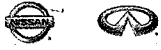
See airtel documents in re my  
complaint ODI # 10949953 filed  
on line on 02/06/17.

I have sent via email because  
my scanner failed & prevented my  
on line attachments w/ the  
complaint.

Thanks very much for your  
attention in completing my file for this  
vital safety concern.

[REDACTED]  
DANVILLE, KY [REDACTED]  
[REDACTED]

NISSAN GROUP  
OF NORTH AMERICA



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Nissan North America, Inc.  
Consumer Affairs  
P.O. Box 685003  
Franklin, TN 37068-5003  
Telephone: 1-800-647-7261

February 3, 2017

[REDACTED]  
Danville, KY [REDACTED]

Case: [REDACTED]  
VIN: **JN8AZ1MW3CW** [REDACTED]

Dear [REDACTED]

Thank you for allowing us an opportunity to review your concerns regarding your 2012 Nissan Murano.

Nissan realizes situations may occur with your Nissan vehicle that, unfortunately, fall outside of the parameters of the New Vehicle Limited Warranty provided with your vehicle. As a company interested in winning lifetime customers, Nissan apologizes for any inconvenience you may have experienced, and we are pleased you took the time to contact us regarding the situation.

Nissan carefully considered your request during a review of all of the available facts pertaining to your specific situation. Nissan is unable to offer financial assistance with the repair of the air bag module due to the vehicle being outside of the New Vehicle Limited Warranty.

We realize this may not be the answer you were looking for, but we hope that you understand our position. If you have any further comments or concerns, please feel free to contact our Consumer Affairs Department at 1-800-647-7261 and reference your case number.

Thank you again for taking the time to contact us.

Sincerely,

Nissan Division

Jennifer  
Consumer Relations Representative  
Nissan Consumer Affairs

\*INVOICE\*

Invoice #:

**BOB ALLEN**



DUPLICATE 1

Tag #: **T48Q**



725 Maple Ave - P.O. Box 1338  
Danville, KY 40423  
Phone (859) 236-3217  
Fax (859) 936-2809  
Toll Free: 877-773-3217



DANVILLE, KY

HOME: [REDACTED] CONT [REDACTED] CELL:

Customer #:

Service Advisor: **793 CHAD BARTLESON**

EMAIL: EMAIL [REDACTED] HOME

COLOR	YEAR	MAKE/MODEL	VIN	LICENSE	MILEAGE IN	MILEAGE OUT			
	12	NISSAN MURANO	JN8AZ1MW3CW		69772	69772			
DEL DATE	PROD. DATE	WARR. EXP.	PROMISED	PO NO.	RATE	PAYMENT	INV. DATE	R.O. OPENED	READY
19MAR14			WAIT 30JAN17		110.00	CASH	30JAN17	11:28 30JAN17	12:35 30JAN17

OPTIONS: ENG:3.5 Liter

**\$39.99\* Special**

- Oil & Filter Change
- Vehicle Inspection
- Alignment Check
- Battery & Charging System Check
- Car Wash

Customer Number: 45669  
Expires: 30Apr2017

*\*Synthetic Oils and Diesel Engines have additional parts cost.*

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**Prevent Costly Transmission Repair!**

**Transmission Flush**

**\$179.99**

Customer Number: 45669  
Expires: 30Apr2017

\*Includes most vehicles.  
See Service Advisor for Details.

LINE OPCODE TECH TYPE HOURS LIST NET TOTAL

A C/S PASSENGER SIDE AIR BAG SENSOR SHOWS OFF WHEN AN ADULT IS SITTING IN THE SEAT PLEASE CHECK AND ADVISE

27 ELECTRICAL SYSTEM 1.00 110.00 110.00

PARTS: 3017 CN 1.00 LABOR: 0.00 OTHER: 0.00 TOTAL LINE A: 110.00

60245 found that occupant sensor unit failed. recommended replacement of passenger air bag system and sensors.

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B PERFORM VEHICLE INSPECTION

CAUSE: PERFORMED VEHICLE INSPECTION

MPI PERFORM VEHICLE INSPECTION

PARTS: 3017 CN 0.00 LABOR: 0.00 OTHER: 0.00 TOTAL LINE B: 0.00

CUSTOMER PAY SHOP CHARGE FOR REPAIR ORDER 15.40

THANK YOU FOR CHOOSING BOB ALLEN MOTOR MALL FOR ALL YOUR SERVICE NEEDS. OUR GOAL IS TO PROVIDE YOU EXCELLENT SERVICE AND TO MAKE YOU COMPLETELY SATISFIED. IF WE HAVE NOT MET OUR GOAL, PLEASE CONTACT ME AT 859-236-3217. THANK YOU! JIM LEE - SERVICE & PARTS DIRECTOR CASH. CHK. VMD. DEBIT: AMX. EFT. REWARD. CHG. OTHER

*\$3563.13*

*1800-647-7261*

*Nissan Consumer Affairs*

*CUSTOMER COPY*

ON BEHALF OF SERVICING DEALER, I HEREBY CERTIFY THAT THE INFORMATION CONTAINED HEREON IS ACCURATE UNLESS OTHERWISE SHOWN. SERVICES DESCRIBED WERE PERFORMED AT NO CHARGE TO ANY OWNER. THERE WAS NO INDICATION FROM THE APPEARANCE OF THE VEHICLE OR OTHERWISE, THAT ANY PART REPAIRED OR REPLACED UNDER THIS CLAIM HAD BEEN CONNECTED IN ANY WAY WITH ANY ACCIDENT, NEGLIGENCE OR MISUSE. RECORDS SUPPORTING THIS CLAIM ARE AVAILABLE FOR (1) YEAR FROM THE DATE OF PAYMENT NOTIFICATION AT THE SERVICING DEALER FOR INSPECTION BY MANUFACTURER'S REPRESENTATIVE.

STATEMENT OF DISCLAIMER  
The factory warranty constitutes all of the warranties with respect to the sale of this item/items. The Seller hereby expressly disclaims all warranties, either express or implied, including any implied warranty of merchantability or fitness for a particular purpose. Seller neither assumes nor authorizes any other person to assume for it any liability in connection with the sale of this item/items.

LABOR AMOUNT	110.00
PARTS AMOUNT	0.00
GAS, OIL, LUBE	0.00
SUBLET AMOUNT	0.00
MISC. CHARGES	15.40
TOTAL CHARGES	125.40
LESS INSURANCE	0.00
SALES TAX	0.92
PLEASE PAY THIS AMOUNT	<b>126.32</b>

(SIGNED) DEALER, GENERAL MANAGER OR AUTHORIZED PERSON (DATE)

CUSTOMER SIGNATURE