



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

Date Received	Repository <input type="checkbox"/>
09-SEP-2019	Reference No. 11254193

OWNER INFORMATION (Type or Print)			
Name	Address		City
Daytime Telephone Number	E-mail Address		State
Evening Telephone Number	Zip Code	State	Zip Code

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
5N1AZ2MH4HN	NISSAN	MURANO	2017
Date Purchased	Dealer's Name and Telephone Number	Engine: No: Cylinders	Fuel Type:
Original Owner <input type="checkbox"/>	Dealer's City	State	Zip Code
Transmission Type	<input type="checkbox"/> Antilock Brakes	Powertrain	Multiple Failure:
<input type="checkbox"/> Cruise Control			Incident Date(s) 31-JUL-2017

FAILED COMPONENT(S)/ PART(S) INFORMATION		
Vehicle Component Codes: 180000 VEHICLE SPEED CONTROL, 250000 ELECTRONIC STABILITY CONTROL	Failure Mileage 58000	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: DOTM19ABC036)	<input type="checkbox"/> Original Equipment <input type="checkbox"/> 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				
<i>(Please describe in detail the incident(s) Failure(s) Crash(es) and injury(ies))</i>				
Crash <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Fire <input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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 2017 NISSAN MURANO. WHILE THE VEHICLE WAS ACCELERATING, THE WHEELS SPUN A LITTLE AND THE ELECTRONIC STABILITY CONTROL MALFUNCTIONED. THE FAILURE CAUSED THE VEHICLE TO NOT ACCELERATE FOR AN EXTENDED PERIOD OF TIME. THE CONTACT MENTIONED THAT THE BRAKE PEDAL NEEDED TO BE DEPRESSED IN ORDER FOR THE VEHICLE TO OPERATE. THE VEHICLE WAS TAKEN TO DAVE SMITH NISSAN (6901 E SPRAGUE AVE, SPOKANE VALLEY, WA 99212, (509) 309-8911) WHERE THEY INFORMED THE CONTACT THAT THE VEHICLE WAS DESIGNED TO OPERATE IN THAT MANNER. THE VEHICLE WAS NOT REPAIRED. THE MANUFACTURER WAS MADE AWARE OF THE FAILURE AND PROVIDE CASE NUMBER: [REDACTED] THE APPROXIMATE FAILURE MILEAGE WAS 58,000.

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 Administration 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. 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.