

FOR AGENCY USE ONLY 100148	
Date Received 15-DEC-2020 MAR 24 2021	Repository <input type="checkbox"/> Reference No. 11383505
Daytime Telephone Number [REDACTED]	E-mail Address
Evening Telephone Number	

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

OWNER INFORMATION (Type or Print)

Name [REDACTED]
Address [REDACTED]
City TOPEKA State KS Zip Code [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: 3N1AB61E08L [REDACTED]
Make: NISSAN Model: SENTRA Model Year: 2008

Date Purchased: [REDACTED] Dealer's Name and Telephone Number: [REDACTED] Engine: [REDACTED] Fuel Type: [REDACTED]
Original Owner: Dealer's City: [REDACTED] State: [REDACTED] Zip Code: [REDACTED]

Transmission Type: Antilock Brakes Cruise Control Powertrain: [REDACTED] Multiple Failure: [REDACTED] Incident Date(s): 24-NOV-2020

FAILED COMPONENT(S)/PART(S) INFORMATION

Vehicle Component Code: 100000 POWER TRAIN Failure Mileage: 80000 Failure Speed: [REDACTED]

ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A TIRE FAILURE

Tire Make: [REDACTED] Tire Model (Name or Number): [REDACTED] Tire Size (Example P215/65R15): [REDACTED]
DOT No. (Example: DOTM19ABC036): [REDACTED] Original Equipment Prior Repair Failure Location: [REDACTED]
Tire Component Code: [REDACTED] Tire Failure Type: [REDACTED]

ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A CHILD SEAT FAILURE

Make: [REDACTED] Date Manufactured: [REDACTED] Model No./Name: [REDACTED]
Seat Type: [REDACTED] Installation System: [REDACTED]
Child Seat Component Code: [REDACTED] Failed Part: [REDACTED]

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: [REDACTED] Number of Deaths: [REDACTED] 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 2008 NISSAN SENTRA. THE CONTACT STATED THAT WHILE DRIVING AT AN UNKNOWN SPEED, THERE WAS AN ABNORMAL NOISE COMING FROM THE FRONT OF THE VEHICLE. THE VEHICLE FAILED TO MOVE FORWARD. THE CONTACT MENTIONED THAT THE TRANSMISSION FAILED. THE VEHICLE WAS TOWED TO THE CONTACT'S RESIDENCE. THE DEALER WAS NOT CONTACTED. THE VEHICLE WAS NOT REPAIRED. THE MANUFACTURER WAS NOTIFIED OF THE FAILURE. THE APPROXIMATE FAILURE MILEAGE WAS 80,000.

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.