

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

ire

FOR AGENCY USE ONLY 100148

Date Received

Repository

27-FEB-2023

MAY 04 2023

Reference No. 11509354

National Highway Traffic Safety Administration

(1-888-327-4236) INTERNET: www.nhtsa.dot.gov/hotline

OWNER INFORMATION (Type or Print)

Name				Daytime Telephone Number	E-mail Address
Address					
City	Linwood	State	NJ	ZIP Code	
				Evening Telephone Number	

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 JN8AZ2NC7D9		MAKE INFINITI	Model QX56	Model Year 2013
Date Purchased 2013	Dealer's Name and Telephone Number Helman Infiniti		Engine: No. Cylinders 8	Fuel Type: Gas
Original Owner <input checked="" type="checkbox"/>	Dealer's City Maple Shade	STATE NJ	ZIP Code 08052	
Transmission Type	<input checked="" type="checkbox"/> Antilock Brakes <input checked="" type="checkbox"/> Cruise Control	Powertrain 8 cylinder	Multiple Failure: Paint Hood/Rear	Incident Date(s) 01-JUN-2022

FAILED COMPONENT(S)/PART(S) INFORMATION

Vehicle Components Codes: 020000 SUSPENSION	Air Suspension System Failed to work after approx 40,000 miles	Failure Mileage 40000.0	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: DOTM1 9ABC036)	<input type="checkbox"/> Original Requirement <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

(Please describe in detail the incident(s), failure(s), crash(es), injury(ies).)

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), 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).

The contact owns a 2013 Infiniti QX56. The contact stated that intermittently while parked, and while driving at various speeds, the rear of the vehicle was sagging. No warning lights were illuminated. The vehicle was taken to a local dealer, where it was diagnosed that the air shocks and compressor needed to be replaced. The vehicle was not repaired. The manufacturer was made aware of the failure, and the contact was informed that the warranty had expired. The approximate failure mileage was 40,000.

The air suspension system never properly worked on this vehicle. There is a well documented history of other owners having the same problem. The vehicle sags to a point where it could be possible to hit the tire. We have attempted to repair it. We replaced the compressor, rideheight stabilizer & rear. ~~to~~ No avail

Include, if available: Police/Fire Department Report, Photos, and Repair Invoice. ATTACH ADDITIONAL SHEETS IF NECESSARY



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

1200 New Jersey Avenue SE  
Washington, DC 20590

Dear Consumer:

NEF-160

As a follow-up to your report to the Vehicle Safety Hotline (VSH), we have recorded your information on the enclosed Vehicle Owner's Questionnaire (VOQ) form. Please review the form and make changes, additions and corrections as necessary. Additionally, please provide a more detailed description of the failure(s) you reported that you believe relevant to safety. Also, if available, include copies of repair invoices, letters to the manufacturer, or any other document related to the problem(s) you reported. If a crash or fire occurred, include a copy of the police or fire department report.

It is helpful to be as thorough as possible in your report so that our ability to use your report will be maximized. If you do not have the information, it is not necessary to complete all the boxes. However, it is very difficult to identify the scope of a vehicle problem unless the vehicle identification number (VIN) is known. The VIN is located inside the vehicle on the dashboard adjacent to the left (driver's side) of the windshield pillar and on the drivers' door or the driver's door jam. It may also be listed on a dealer repair invoice or your insurance or registration cards. When reporting a tire problem, the brand name, tire line and complete tire size should be included. Be certain to provide the DOT tire identification number. It is usually located near the rim flange of the tire on either side of the tire.

We do not make your personal information (name, address, phone numbers, etc.) available to the general public. However, if we open an investigation that involves your vehicle, we will provide the manufacturer of your vehicle with a complete copy of your report. The information you provide may assist the manufacturer and NHTSA in determining if a safety-related defect exists.

Any information provided is entirely voluntary. There is no consequence or penalty of any kind if you do not wish to provide it. We seek this information to develop both statistical and investigative evidence that will help identify potential safety related problems in vehicles or vehicle equipment, e.g., tires, child safety seats, jacks, etc.

When completed, please fold and staple or tape the form so that the pre-addressed portion of the form is on the outside. If a larger envelope is used, tape the VOQ form to the larger envelope so that the pre-addressed portion of the form is showing.

If further assistance is needed, please contact the VSH at their toll-free number, 1-888-327-4236.

Thank you for your cooperation.

Sincerely,

Randy Reid Chief  
Correspondence Research Division  
Office of Defects Investigation  
Enforcement

Enclosure: VOQ

[REDACTED]  
Linwood, NJ [REDACTED]



NHTSA      W48-226  
1200 New Jersey Ave SE  
Washington, DC 20590

ATTN: Randy Reid, Chief  
Office of Defects Investigation Enforcement