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

DOT Auto Safety Hotline Vehicle Owner's Questionnaire

TO REPORT VEHICLE SAFETY DEFECT
1-888-DASH-2-DOT
1-888-327-4236
INTERNET: <http://www.nhtsa.dot.gov>

RECEIVED FOR AGENCY USE ONLY

Date Received: **00 JAN -3 AM 9:03**

OFFICE OF DEFECTS INVESTIGATION

OC'd

od_rft _____
up_ltr _____

OWNER INFORMATION (Type or Print)

Name: _____
Street: _____
City: _____

550170

Daytime Telephone Number: _____

Do you authorize NHTSA to provide a copy of this report to the manufacturer of your vehicle? YES NO
In the absence of an authorization, NHTSA will not provide your name or address to the vehicle manufacturer.

Signature of Owner: _____ Date: **12/19/99**

VEHICLE INFORMATION

Vehicle Ident. No. (VIN.) (17 Digits) JN1HTJ01P2K267964	(Located at bottom of windshield on driver's side)	Vehicle Make NISSAN	Vehicle Model MAXIMA	Vehicle Year 1989	Current Odometer Reading 141323
Purchased Date FEB 1990	Dealer's Name ARIZONA NISSAN	Engine Size (CID/CGA)	No. Cylinders 6	<input type="checkbox"/> Turbo <input type="checkbox"/> Diesel <input checked="" type="checkbox"/> Gas <input type="checkbox"/> Fuel Injection	
<input checked="" type="checkbox"/> New <input type="checkbox"/> Used	Dealer's City ARIZONA	State CA	Zip Code 90247		
Transmission Type <input type="checkbox"/> Manual <input checked="" type="checkbox"/> Automatic	Antilock Brakes <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Restraint System <input checked="" type="checkbox"/> Driverside Airbag <input type="checkbox"/> Motorbelt <input type="checkbox"/> Passengerside Airbag <input type="checkbox"/> 2-Point Belt <input checked="" type="checkbox"/> 3-Point Belt	Cruise Control <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Drivetrain <input checked="" type="checkbox"/> Front <input type="checkbox"/> Rear <input type="checkbox"/> 4-Wheel	Vehicle Type <input checked="" type="checkbox"/> Car <input type="checkbox"/> Van <input type="checkbox"/> Truck <input type="checkbox"/> Minivan <input type="checkbox"/> Motorcycle <input type="checkbox"/> Other
					Body Style <input type="checkbox"/> 2-Door <input checked="" type="checkbox"/> 4-Door <input type="checkbox"/> Stationwagon <input type="checkbox"/> Pick Up Truck <input type="checkbox"/> Other

FAILED COMPONENT(S)/PART(S) INFORMATION

Component MOTOR MOUNTS	Part Name(s) MOTOR MOUNTS	Location <input checked="" type="checkbox"/> Left <input type="checkbox"/> Front <input type="checkbox"/> Right <input type="checkbox"/> Rear	Failed Part(s) <input checked="" type="checkbox"/> Original <input type="checkbox"/> Replacement
No. of Failures	Date(s) of Failure(s) 12-18-99	Failed Part(s) Available? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	NHTSA Previously Contacted? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
	Mileage at Failure(s) 141300		
	Vehicle Speed at Failure(s): _____		

APPLICABLE INCIDENT INFORMATION

(Please describe in detail the incident(s), Failure(s), Crash(es), and Injury(ies) on the back of this form)

Crash <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Fire <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Number Persons Injured 2	Number of Fatalities 0	Estimated Property Damage \$ 2	Reported to Police <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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INFORMATION ON TIRE FAILURE(S) (IF APPLICABLE)

To report defective or failed tires provide the following: DOT Number, Tire Manufacturer, Tire Name, Tire Size (include all numbers and letters).
Note: This information not required for normal operation tires.

DOT	Manufacturer	Tire Name	Complete Tire Size
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U.S. DOT safety standard code
The number may be on the inner side of the tire and have up to 11 letters and numbers. Usually located near rim flange on side opposite whitewall or on either side of blackwall tire.

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 administration enforcement or litigation against a manufacturer, your response, or a statistical summary thereof, may be used in support of the agency's action.

Narrative Description of Incident(s), Failure(s), Crash(es), and Injury(ies)

WHEEL SURGED + JERKED COULD BE A SERIOUS IF AN ICE SNOW - OR IF THROTTLE STUCK/JAMMED IN TRAFFIC

ATTACH ADDITIONAL SHEETS IF NECESSARY

U.S. Department of Transportation

National Highway Traffic Safety Administration

400 Seventh St., S.W. Washington, D.C. 20590

Official Business Penalty for Private Use \$300



NO POSTAGE NECESSARY IF MAILED IN THE UNITED STATES

BUSINESS REPLY MAIL

FIRST CLASS PERMIT NO 73173 WASHINGTON, D.C.

POSTAGE WILL BE PAID BY NATL. HWY. TRAFFIC SAFETY ADMIN.



U.S. Department of Transportation National Highway Traffic Safety Administration DOT Auto Safety Hotline, NSA-10.1 400 7th Street, SW Washington, DC 20590



VEHICLE OWNER'S QUESTIONNAIRE

DOT AUTO SAFETY HOTLINE

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DASH2DOT

and dial toll free at

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1-888-327-4236

DOT Auto Safety Hotline (DASH) 2 DOT



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