Form Approved: O.M.B. No. 2127-0006

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

Posted

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Date Received

Odi#
rt_lt
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Reference No.
561228

OWNER INFORMATION (Type or Print)

Name [redacted]

Street [redacted]

City [redacted]

Daytime Telephone Number [redacted]

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 [redacted] Date 05,09,01

PRODUCT INFORMATION

Vehicle Identification No. (VIN.) (17 Digits) (Located at bottom of windshield on driver's side)	Make	Model	Year
1 N 4 E B 3 2 A 4 M C 7 9 8 1 1 6	NISSAN	SENTRA	1991

Purchased Date 7/3/96 ☐ New ☑ Used

Dealer's Name NOT APPLICABLE

Dealer's City NOT APPLICABLE State ____ Zip Code ____

Engine Size (Cid/Liter) 1.6 No. Cylinders 4 ☐ Turbo ☐ Diesel ☑ Gas ☐ Fuel Injection

Manufacture Date (on driver's door or pillar)	Transmission Type	Restraint System	Cruise Control	Drivetrain	Vehicle Type	Body Style
5/91	☐ Manual ☑ Automatic	☑ Driverside Air Bag ☐ Passengerside Air Bag ☐ 3-Point Belt ☐ Motorbelt ☐ 2-Point Belt	☑ Yes ☐ No	☑ Front ☐ Rear ☐ 4-Wheel	☑ Car ☐ Van ☐ Minivan ☐ Sport Utility ☐ Truck ☐ Motorcycle ☐ Other ____	☑ 2-Door ☐ 4-Door ☐ Stationwagon ☐ Pick Up Truck ☐ Other ____

FAILED COMPONENT(S)/PART(S) INFORMATION

Part Name(s)	Location	Failed Part(s)	Handicap Adaptive Equip
NOT APPLICABLE	☐ Left ☐ Right ☐ Front ☐ Rear	☐ Original ☐ Replacement	☐ Yes ☐ No

TO BE COMPLETED WHEN REPORTING A TIRE FAILURE

Tire Brand	Tire Name	Complete Tire Size

No. of Failures	Date(s) of Failure(s) / Mileage at Failure(s) / Vehicle Speed at Failure(s):	Failed Part(s) Available?	NHTSA Previously Contacted?
		☐ Yes ☐ No	☐ Yes ☐ No

APPLICABLE INCIDENT INFORMATION

(Please describe in detail the Incident(s), Failure(s), Crash(es), and Injury(ies). Attach photos if available.)

Crash	Fire	Number of Persons Injured	Number of Fatalities	Reported to Manufacturer
☐ Yes ☑ No	☐ Yes ☑ No	1	0	☐ Yes ☑ No

Narrative Description of Incident(s), Failure(s), Crash(es), and Injury(ies). IN NOVEMBER 1999, WHILE GETTING INTO THE DRIVERS SEAT, MY LEFT ACHILLES TENDON STRUCK THE LEVER UNDER THE SEAT. (LEVER ALLOWS SEAT TO BE MOVED FORWARD AND BACK.) FORTUNATLY, THE TEAR WAS NOT COMPLETE AND SURGERY WAS NOT NECESSARY. MY MOBILITY WAS HAMPERED FOR SEVERAL MONTHS DURING THE HEALING PROCESS. I FEEL THE LEVER SHOULD HAVE BEEN PLACED ON SIDE OF SEAT OR MADE WITH A THICKER SHAFT.

Continue on back.

The Privacy Act of 1974 - Public Law 93-579 *This information is requested pursuant to a49 U.S.C. Chapter 301. You are under no obligation to respond to this questionnaire. Your response may be used to assist NHTSA in determining whether a manufacturer should take appropriate action to correct a safety defect. If 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.*

Mail postage free or fax to 202-366-7882