



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

Auto Safety Hotline

Vehicle Owner's Questionnaire

NATIONWIDE 1-800-424-9393
DC METRO AREA (202) 366-0123
INTERNET: <http://www.nhtsa.dot.gov>

FOR AGENCY USE ONLY 258

Date Received

08-MAY-2002

Ord. or
rt. dt _____
pd. rt _____
rp. lr _____

Reference No.

761669

OWNER INFORMATION (Type or Print)

MARC ROBITAILLE 753246
34 BAYNE ST
EAST LONGMEADOW MA 01028

Work Number

Home Number

Do you authorize NHTSA to provide a copy of report to the manufacturer of your vehicle? YES NO
In the absence of an authorization, NHTSA WILL NOT provide your name and address to the vehicle manufacturer.

Signature of Owner _____ Date ____/____/____

VEHICLE INFORMATION

Vehicle Ident. No. (VIN.) <small>(Leave blank for use by dealer or other authorized party)</small>	Vehicle Make	Vehicle Model	Vehicle Year	Current Odometer Reading
	NISSAN	PULSAR	1989	

Purchase Date 01-JUN-2090	Dealer's Name _____	Engine Size (CID/CC/L) _____	<input type="checkbox"/> Turbo
<input checked="" type="checkbox"/> New <input type="checkbox"/> Used	City _____ State _____ Zip Code _____	No. Cylinders _____	<input type="checkbox"/> Diesel <input type="checkbox"/> Gas <input type="checkbox"/> Fuel Injectio

Transmission Type <input type="checkbox"/> Manual	Antilock Brakes <input type="checkbox"/> Yes	Restraint System <input type="checkbox"/> 3-Point Belt <input type="checkbox"/> Motorbelt	Cruise Control <input type="checkbox"/> Yes	Drive Train <input checked="" type="checkbox"/> Front	Vehicle Type <input type="checkbox"/> Car <input type="checkbox"/> Van <input type="checkbox"/> Sport Util <input type="checkbox"/> Truck	Body Style <input type="checkbox"/> 2-Door <input type="checkbox"/> 4-Door
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