



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 936

Date Received

25-JUN-2002

Ord. or
rt_dt _____
pd_rt _____
rp_lr _____

Reference No.

8012622

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>(Location at bottom of and/or above windshield)</small>	Vehicle Make	Vehicle Model	Vehicle Year	Current Odometer Reading		
1N4BL11D52C206574	NISSAN	ALTIMA	2002			
Purchase Date <input type="checkbox"/> New <input checked="" type="checkbox"/> Used	Dealer's Name _____ City _____ State _____ Zip Code _____		Engine Size (CID/CC/L) _____ No. Cylinders _____	<input type="checkbox"/> Turbo <input type="checkbox"/> Diesel <input type="checkbox"/> Gas <input type="checkbox"/> Fuel Injectio		
Transmission Type <input type="checkbox"/> Manual <input type="checkbox"/> Automatic	Antilock Brakes <input type="checkbox"/> Yes <input type="checkbox"/> No	Restraint System <input type="checkbox"/> 3-Point Belt <input type="checkbox"/> Motorbelt <input type="checkbox"/> Driverside Airbag <input type="checkbox"/> 2-Point Bel <input type="checkbox"/> Passengerside Airbag	Cruise Control <input type="checkbox"/> Yes <input type="checkbox"/> No	Drive Train <input type="checkbox"/> Front <input type="checkbox"/> Rear <input type="checkbox"/> 4-Wheel	Vehicle Type <input type="checkbox"/> Car <input type="checkbox"/> Sport Util <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 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 08220100	Part Name(s) ELECTRICAL SYSTEM:INSTRUMENT PANEL:CLUSTER MODULE	Location <input type="checkbox"/> Left <input type="checkbox"/> Right <input type="checkbox"/> Front <input type="checkbox"/> Rear	Failed Part's <input type="checkbox"/> Original <input type="checkbox"/> Replacement
No of Failure	Dates of Failure(s) 24-JUN-2002 Mileage at Failure(s) 2400 Vehicle Speed at Failure(s) _____	Failed Part(s) <input type="checkbox"/> Yes <input type="checkbox"/> No	NHTSA Previously <input type="checkbox"/> Yes <input type="checkbox"/> No

APPLICATION 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 type="checkbox"/> No	Fire <input type="checkbox"/> Yes <input type="checkbox"/> No	Number of Persons Injured	Number of Fatalities	Estimated Property Damag	Reported to Polic <input type="checkbox"/> Yes <input type="checkbox"/> No
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NARRATIVE DESCRIPTION OF FAILURE(S), INCIDENT(S), INJURY(IES)

INSTRUMENT PANEL IS VISABLE IN DRIVER'S WINDOW. THAT'S ALL ONE CAN SEE WHEN DRIVING. CONSUMER HAS TO STARE REALLY HARD TO SEE OUT OF WINDOW CLEARLY. CONSUMER FEELS THIS IS VERY DANGEROUS. PLEASE PROVIDE ANY FURTHER INFORMATION.*AK

COPIED FROM NHTSA - REF - 1

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.

DOT Auto Safety Hotline		FOR AGENCY USE ONLY 336	
U.S. Department of Transportation National Highway Traffic Safety Administration		Vehicle Owner's Questionnaire (VOQ) NATIONWIDE 1-888-DASH-2-DOT 1-888-327-4236 www.nhtsa.dot.gov/hotline	
OWNER INFORMATION (Type or Print) [Redacted] [Redacted] 760983 BENICIA BENICIA CA		Date Received: 25 JUN 2002 OFFICE DEFECTS INVESTIGATION Reference No. 8012622	
Do you authorize NHTSA to provide a copy of report to the manufacturer of your vehicle? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO In the absence of an authorization, NHTSA WILL NOT provide your name and address to the vehicle manufacturer.		Signature of Owner: [Redacted] Date: 7/8/02	
VEHICLE INFORMATION			
Vehicle Ident. No. (VIN) (Located at bottom of windshield on driver's side)	Vehicle Make	Vehicle Model	Vehicle Year
1N4BL11D52C206574	NISSAN	ALTIMA	2002
Current Odometer Reading	Purchase Date		Dealer's Name
3000	3-28-02		VALLEJO NISSAN
Engine Size (CID/CC/L)	No. Cylinders	City State Zip Code	
3.5L	6	VALLEJO CA 94590	
Turbo <input type="checkbox"/> Diesel <input type="checkbox"/> Gas <input checked="" type="checkbox"/> Fuel Injectio <input type="checkbox"/>	Transmission Type: <input checked="" 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"/> 3-Point Belt <input type="checkbox"/> Motorbelt <input type="checkbox"/> Driverside Airbag <input type="checkbox"/> 2-Point Bel. <input checked="" type="checkbox"/> Passengerside Airbag
Cruise Control: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Drive Train: <input type="checkbox"/> Front <input type="checkbox"/> Rear <input checked="" type="checkbox"/> 4-Wheel	Vehicle Type: <input checked="" type="checkbox"/> Car <input type="checkbox"/> Van <input type="checkbox"/> Minivan <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 <input type="checkbox"/> Truck
FAILED COMPONENT(S)/PART(S) INFORMATION			
Component	Part Name(s)	Location	Failed Part(s)
08320100	ELECTRICAL SYSTEM: INSTRUMENT PANEL: CLUSTER MODULE	<input type="checkbox"/> Left <input type="checkbox"/> Right <input type="checkbox"/> Front <input type="checkbox"/> Rear	<input type="checkbox"/> Original <input type="checkbox"/> Replacement
No. of Failures	Date(s) of Failure(s)	Mileage at Failure(s)	Vehicle Speed at Failure(s)
	24 JUN 2002	2400	
		Failed Part(s): <input type="checkbox"/> Yes <input type="checkbox"/> No	NHTSA Previously: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
APPLICATION INCIDENT INFORMATION			
(Please describe in detail the incident(s), Failure(s), Crash(es), and injury(ies) on the back of this form)			
Crash	Fire	Number of Persons Injured	Number of Fatalities
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
Estimated Property Damage	Reported to Police		
	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
NARRATIVE DESCRIPTION OF FAILURE(S), INCIDENT(S), INJURY(IES)			
INSTRUMENT PANEL IS VISABLE IN DRIVER'S WINDOW, THAT'S ALL ONE CAN SEE WHEN DRIVING. CONSUMER HAS TO STARE REALLY HARD TO SEE OUT OF WINDOW CLEARLY. CONSUMER FEELS THIS IS VERY DANGEROUS. PLEASE PROVIDE ANY FURTHER INFORMATION. *AK THE DESCRIPTION ABOVE IS NOT CORRECT, AND IS OBVIOUSLY THE RESULT OF A MISUNDERSTANDING ON THE PART OF THE PERSON I TALKED TO ON THE PHONE. I WILL NOW ATTEMPT TO BE MORE CLEAR. MY COMPLAINT IS THAT THE INSTRUMENT PANEL IS NOT VISIBLE ENOUGH FOR ME TO QUICKLY & SAFELY CHECK THE GAGES, WHILE			
CONTINUE ON BACK IF NEEDED			
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 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.			

BACK

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

DRIVING IN DAYLIGHT, ESPECIALLY WHILE I AM WEARING DARK GLASSES, WHICH IS MOST OF THE TIME, ALTHOUGH, EVEN WITHOUT DARK GLASSES ON, THE GAUGES ARE MARGINALLY VISIBLE.

IT IS IMPORTANT TO ME TO STAY IN TOUCH WITH THE ENGINE TEMPERATURE, FUEL LEVEL, AND SPEED OF MY CAR WHILE DRIVING, AND OF THE DOZENS OF CARS I HAVE DRIVEN IN THE LAST 45 YEARS, THIS NEW ALTIMA HAS THE LEAST VISIBLE INSTRUMENTS OF ALL.

A GLANCE AT THE INSTRUMENTS SHOULD SUFFICE, BUT IN THIS CAR, A GLANCE IS NOT ENOUGH, AND I HARDLY NEED TO POINT OUT THE DANGER OF STARRING AT THE GAUGES LONGER THAN SHOULD BE NEEDED, WHILE DRIVING AT FREEWAY SPEED IN THE HEAVY TRAFFIC WE HAVE TODAY. YOU REALLY NEED TO DRIVE A 2002 ALTIMA FOR A DAY OR TWO ON BRIGHT SUNLIGHT TO SEE WHAT I MEAN.

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

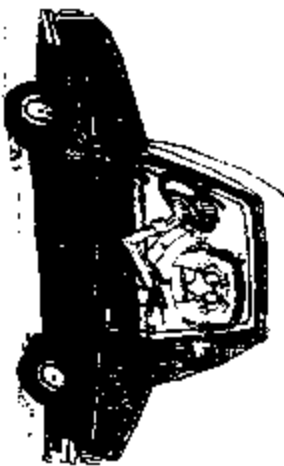
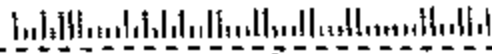


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FIRST CLASS PERMIT NO 73173 WASHINGTON, D.C.

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

2059040001



U.S. Department of Transportation
National Highway Traffic Safety Administration
<http://www.nhtsa.dot.gov/hotline>



DOT Auto Safety Hotline
(DASH) 2 DOT

1-888-DASH-2-DOT
1-888-327-4236

DASH2DOT
and dial toll free at

TO REPORT VEHICLE SAFETY DEFECTS
COMPLETE THIS FORM
OR

DOT AUTO SAFETY HOTLINE

QUESTIONNAIRE



**VEHICLE
OWNER'S**