

I HAVE requested and been denied the opportunity to meet with the CEO of Nissan. ALL MEDICAL EXPENSES WERE DENIED ON/ON NOT AUTHORIZED. The Dept of TRANSPORTATION & US ATTORNEYS HAVE

| DOT Auto Safety Hotline                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |  |                                                                                                                    |  | FOR AGENCY USE ONLY                                                                                                                                                                                                                                                      |  |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--------------------------------------------------------------------------------------------------------------------|--|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|
| U.S. Department of Transportation<br>National Highway Traffic Safety Administration                                                                                                                                                                                                                                                                                                                                                                                                                                            |  | Vehicle Owner's Questionnaire (VOQ)                                                                                |  | Date Received<br>8:50<br>03-SEP-2002                                                                                                                                                                                                                                     |  |
| NATIONWIDE 1-888-DASH-2-DET<br>1-888-327-4236<br>www.nhtsa.dot.gov/hotline                                                                                                                                                                                                                                                                                                                                                                                                                                                     |  | OFFICE INVESTIGATION                                                                                               |  | Od or<br>nht<br>ed rt<br>up fr                                                                                                                                                                                                                                           |  |
| OWNER INFORMATION (Type or Print)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |  | DETECTIVE INVESTIGATION                                                                                            |  | Reference No.<br>8017813                                                                                                                                                                                                                                                 |  |
| MANDEVILLE LA                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |  | Work Number                                                                                                        |  | Home Number                                                                                                                                                                                                                                                              |  |
| Do you authorize NHTSA to provide a copy of report to the manufacturer of your vehicle?<br>In the absence of an _____ see to the vehicle manufacturer.                                                                                                                                                                                                                                                                                                                                                                         |  |                                                                                                                    |  | YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>                                                                                                                                                                                                      |  |
| Signature of Owner _____                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |  |                                                                                                                    |  | Date 04/26/2003                                                                                                                                                                                                                                                          |  |
| NOTE: AUTOMATIC FLUORESCENT VEHICLE INFORMATION SYSTEM PERFORMED 12 DAYS                                                                                                                                                                                                                                                                                                                                                                                                                                                       |  |                                                                                                                    |  |                                                                                                                                                                                                                                                                          |  |
| Vehicle Ident. No. (VIN)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |  | Vehicle Make                                                                                                       |  | Vehicle Year                                                                                                                                                                                                                                                             |  |
| V14AL11D02Z112572                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |  | NISSAN                                                                                                             |  | 2002                                                                                                                                                                                                                                                                     |  |
| Purchase Date<br>10/25/2001                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |  | Dealer's Name<br>Eddie Tomlin's Northpark Nissan                                                                   |  | Engine Size<br>(CHEVY) 175HP                                                                                                                                                                                                                                             |  |
| <input checked="" type="checkbox"/> New <input type="checkbox"/> Used                                                                                                                                                                                                                                                                                                                                                                                                                                                          |  | City CAVINATA State LA Zip Code 70433                                                                              |  | No Cylinders 4                                                                                                                                                                                                                                                           |  |
| Transmission Type<br><input type="checkbox"/> Manual<br><input checked="" type="checkbox"/> Automatic                                                                                                                                                                                                                                                                                                                                                                                                                          |  | Antilock Brakes<br><input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No                          |  | Restraint System<br><input checked="" type="checkbox"/> 3-Point Belt<br><input type="checkbox"/> Motorbelt<br><input checked="" type="checkbox"/> Driverside Airbag<br><input type="checkbox"/> 2-Point Belt<br><input checked="" type="checkbox"/> Passengerside Airbag |  |
| Cruise Control<br><input checked="" type="checkbox"/> Yes<br><input type="checkbox"/> No                                                                                                                                                                                                                                                                                                                                                                                                                                       |  | Drive Train<br><input type="checkbox"/> Front<br><input type="checkbox"/> Rear<br><input type="checkbox"/> 4-Wheel |  | Vehicle Type<br><input checked="" type="checkbox"/> Car<br><input type="checkbox"/> Van<br><input type="checkbox"/> Minivan<br><input type="checkbox"/> Other                                                                                                            |  |
| Body Style<br><input type="checkbox"/> 2-Door<br><input type="checkbox"/> 4-Door<br><input type="checkbox"/> Station Wagon<br><input type="checkbox"/> Pick Up<br><input type="checkbox"/> Truck                                                                                                                                                                                                                                                                                                                               |  | Turbo Diesel Gas Fuel Injection                                                                                    |  |                                                                                                                                                                                                                                                                          |  |
| FAILED COMPONENT(S)/PART(S) INFORMATION                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |  |                                                                                                                    |  |                                                                                                                                                                                                                                                                          |  |
| Component<br>88308000<br>12420000                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |  | Part Name(s)<br>ELECTRICAL SYSTEM: WIRING<br>INTERIOR SYSTEMS: INSTRUMENT PANEL: GAUGE: INDICATOR                  |  | Location<br><input checked="" type="checkbox"/> Left<br><input type="checkbox"/> Right<br><input type="checkbox"/> Front<br><input type="checkbox"/> Rear                                                                                                                |  |
| No of Failures<br>One                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |  | Date(s) of Failure(s)<br>27-AUG-2002                                                                               |  | Failed Part(s)<br><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No                                                                                                                                                                                    |  |
| Mileage at Failure(s)<br>7800                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |  | Vehicle Speed at Failure(s)<br>68 mph                                                                              |  | NHTSA Previously Reported to a<br>Federal Agency<br><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No                                                                                                                                                  |  |
| Description<br>APPLICATION INCIDENT INFORMATION<br>(Please describe in detail the incident(s), failure(s), crash(es), and injury(ies) on the back of this form)                                                                                                                                                                                                                                                                                                                                                                |  |                                                                                                                    |  |                                                                                                                                                                                                                                                                          |  |
| Crash<br><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No                                                                                                                                                                                                                                                                                                                                                                                                                                                   |  | Fire<br><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No                                        |  | Number of Persons Injured<br>1                                                                                                                                                                                                                                           |  |
| Number of Fatalities<br>0                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |  | Estimated Property Damage<br>32,000                                                                                |  | Reported to Police<br><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No                                                                                                                                                                                |  |
| NARRATIVE DESCRIPTION OF FAILURE(S), INCIDENT(S), INJURY(IES)                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |  |                                                                                                                    |  |                                                                                                                                                                                                                                                                          |  |
| WHILE TRAVELING 70MPH ON HIGHWAY AND WITHOUT PRIOR WARNING ENGINE CHECK LIGHT APPEARED ON DASHBOARD, INDICATING THAT VEHICLE CAUGHT ON FIRE. DEALERSHIP WAS AWARE OF PROBLEM. *AK. Sudden loss of power - click-click-click sound - sounded like fuel injection system. Oil light and battery light were illuminated. The fire seemed to originate from the right Anderson output of the engine. The hood, both front quarter panels, windshield, and passenger/driver compartment were engulfed in flames 3 seconds after the |  |                                                                                                                    |  |                                                                                                                                                                                                                                                                          |  |

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.

First Audible "click-click-click" Nissan investigators presented the OVER AT temperature of the fire, which could not be extinguished by 2 fire engines. 3000

Nissan has not responded to 3 months of my clearly articulated phone to remove the 2002 Altima

NOTE: There are at least 2 very similar events (no collision, normal driving,  
NW Aids 202 Narrative Description of Incident(s), Failure(s), Crash(es), and Injury(ies)  
Antecedents That Also Affect Later Events

The package of insulin of the car was filled with dark blood  
broken within 1-2 seconds. Visibility was zero, power windows  
which were opaque and was amber black. The four  
passenger windows were black and contained black blood  
from the emergency. The driver broken into accident  
with the emergency electrical components inside of the  
broken car, seen with 300 national car was broken inside  
within 2 seconds. To avoid death, I called out of the  
car (no passengers were present) into the car from that I was taken  
to the service 1200. I sustained C5-C6 cervical disc injury,  
C6-C7 cervical disc injury, internal dislocation of the left  
shoulder, posterior dislocation of the right elbow, and internal  
dislocation of the right knee. Total 5-6 hours of operations. No other information  
from them given that the event was their responsibility. Fault and  
that they would bring medical expenses and  
take "great care of all the details". They  
have not heard from them.

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

## BUSINESS REPLY MAIL

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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

NO POSTAGE  
NECESSARY  
IF MAILED  
IN THE  
UNITED STATES



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

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

VEHICLE  
OWNER'S  
QUESTIONNAIRE

