

U.S. Department
of TransportationNational Highway
Traffic Safety
Administration

DOT Auto Safety Hotline

Vehicle Owner's Questionnaire (VOQ)

NATIONWIDE 1-888-DASH-2-DOT

1-888-327-4236

www.nhtsa.dot.gov/hotline

FOR AGENCY USE ONLY

117

Date Received

15-JUN-2000

 Od_or _____
 rt_dt _____
 od_rt _____
 up_ltr _____

Reference No.

863632

 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>(located at bottom of windshield or driver's side)</small>	Vehicle Make	Vehicle Model	Vehicle Year	Current Odometer Reading
JN1HU11S4FTD50004	NISSAN	MAXIMA	1987	

Purchase Date	Dealer's Name _____	Engine Size (CID/CCL) _____	<input type="checkbox"/> Turbo
<input type="checkbox"/> New <input checked="" type="checkbox"/> Used	City _____ State _____ Zip Code _____	No. Cylinders _____	<input type="checkbox"/> Diesel
			<input type="checkbox"/> Gas
			<input checked="" type="checkbox"/> Fuel Injection

Transmission Type	Antilock Brakes	Restraint System	Cruise Control	Drive Train	Vehicle Type	Body Style
<input type="checkbox"/> Manual <input type="checkbox"/> Automatic	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> 3-Point Belt <input type="checkbox"/> Driverside Airbag <input type="checkbox"/> Passengerside Airbag	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Front <input type="checkbox"/> Rear <input type="checkbox"/> 4-Wheel	<input type="checkbox"/> Car <input type="checkbox"/> Van <input type="checkbox"/> Minivan <input type="checkbox"/> Other _____	<input type="checkbox"/> Sport Ult <input type="checkbox"/> Truck <input type="checkbox"/> Motorcycle
		<input type="checkbox"/> Inlulubell <input checked="" type="checkbox"/> 2-Point Belt				<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 08310000	Part Name(s) ELECTRICAL SYSTEM;WIRING;HARNES;FRONT;UNDERHOOD	Location	Failed Part(s)
		<input type="checkbox"/> Left <input type="checkbox"/> Front <input type="checkbox"/> Right <input type="checkbox"/> Rear	<input type="checkbox"/> Original <input type="checkbox"/> Replacement

No. of Failures 1	Date(s) of Failure(s) 27-JAN-2000	Failed Part(s) Available?	NHTSA Previously Contacted?
	Mileage at Failure(s) 150	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
	Vehicle Speed at Failure(s) 10		

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	Estimated Property Damage	Reported to Police
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	0	0		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

NARRATIVE DESCRIPTION OF FAILURE(S), INCIDENT(S), INJURY(IES)

HAD COME UPON A STOP LIGHT, STARTED TO TAKE OFF & SMELLED FUEL. NOTICED SMOKE COMING FROM UNDER THE HOOD. PULLED OVER & LIFTED HOOD. NOTICED FLAMES & PUT OUT FIRE. VEHICLE TOWED TO DEALERSHIP. MECHANIC CHECKED VIN & NOTICED A RECALL AFFECTING THIS VEHICLE. HOWEVER, MANUFACTURER REFUSED RECALL REPAIRS DUE TO LACK OF MAINTENANCE RECORDS. *AK

CONTINUED 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 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.



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JUL 26 AM 11:35
15-JUN-2000

OFFICE

DEFECTS INVESTIGATION

Od. or rt. dt. od. rt. up. ltr.

Reference No.

863632

Work Number

Home Number

OWNER INFORMATION (Type or Print)

[Redacted Owner Information]

Do you authorize NHTSA to provide a copy of report to the manufacturer of your vehicle?
In the absence of [Redacted] address to the vehicle manufacturer.
Signature of Owner [Redacted] Date 07/17/00

VEHICLE INFORMATION

Vehicle Ident. No. (VIN.) (located at bottom of windshield on drivers side) **JN1HU11S4FT050004** Vehicle Make **NISSAN** Vehicle Model **MAXIMA** Vehicle Year **1987** Current Odometer Reading **132,000**

Purchase Date [Redacted] Dealer's Name [Redacted] Engine Size (CID/CC/L) **3600** Turbo Diesel Gas Fuel Injection No Cylinders **6cyl**

Transmission Type Manual Automatic Antilock Brakes Yes No Restraint System 3-Point Belt Motorbelt Driverside Airbag 2-Point Belt Passengerside Airbag Cruise Control Yes No Drive Train Front Rear 4-Wheel Vehicle Type Car Sport Ult Van Truck Minivan Motorcycle Other Body Style 2-Door 4-Door Stationwagon Pick Up Truck Other

FAILED COMPONENT(S)/PART(S) INFORMATION

Component **0831000** Part Name(s) **ELECTRICAL SYSTEM:WIRING:HARNES:FRONT:UNDERHOOD** Location Left Right Front Rear Failed Part(s) Original Replacement

No of Failures **1** Date(s) of Failure(s) **27-JAN-2000** Mileage at Failure(s) **130** Vehicle Speed at Failure(s) **10** Failed Part(s) Available? Yes No NHTSA Previously Contacted? Yes 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 Yes No Fire Yes No Number of Persons Injured **0** Number of Fatalities **0** Estimated Property Damage **\$5200.00** Reported to Police Yes No

NARRATIVE DESCRIPTION OF FAILURE(S), INCIDENT(S), INJURY(IES)

HAD COME UPON A STOP LIGHT, STARTED TO TAKE OFF & SMELLED FUEL. NOTICED SMOKE COMING FROM UNDER THE HOOD. PULLED OVER & LIFTED HOOD. NOTICED FLAMES & PUT OUT FIRE. VEHICLE TOWED TO DEALERSHIP. MECHANIC CHECKED VIN & NOTICED A RECALL AFFECTING THIS VEHICLE. HOWEVER, MANUFACTURER REFUSED RECALL REPAIRS DUE TO LACK OF MAINTENANCE RECORDS.
*AK *manufacturer will not repair vehicle to running condition*

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 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.

Monday, July 10, 2000

To whom it may concern:

Nissan has refused to return my vehicle to running condition after its defective component had burned up the engine compartment and wiring in my 1987 Nissan Maxima.

I have provided them with all the information I have at my disposal, and they have refused it based on the fact that I do not have any maintenance records. Since I purchased the car used maintenance records were not nor could be furnished.

I have been without a vehicle for five months now and getting nowhere with Nissan. I couldn't afford to buy another vehicle nor did I have insurance, for the vehicle went up in smoke before I could get it insured... I had incurred a vehicle rental charge that I included in the documents to Nissan, also the repair order from the Nissan Dealership here in town tried to get Nissan to fix the vehicle. Their Service Tec's. Looked at the vehicle and determined the damage was caused by the faulty Fuel Injector Seals.

I do hope you can help me get my vehicle back in running condition. And make Nissan own up to their equipment failure causing the destruction of my vehicle.

Thank You



Estimate Report

20200

YEAR PS MAKE Nissan MODEL Maxima
 LICENSE [REDACTED] MILEAGE 132,059
 VIN. NO. JN1HU1154F050004

PHONE [REDACTED] PROD. DATE _____ BODY CODE _____ PART _____ TRAIL _____

LINE NO.	QUANTITY	REPLACE	DETAILS OF REPAIR	BODY	PAINT	FRAME	MECH	PARTS	SUBLET/MISC
1			ENGINE FIRE						
2			FULL INTAKE SYSTEM LEAKING						
3			DIAGNOSIS				1.0		
4	X		MAIN WIRING HARNESS					1024 17	
5	X		DISTRIBUTOR					492 06	
6	X		THROTTLE CABLE					24 50	
7	X		WASHER HOSES					20 00	
8	X		AIR REGULATOR					79 00	
9	X		VACUUM HOSES					20 00	
10	X		ABC VALVE					213 38	
11	X		AAC VALVE					319 39	
12	X		WIRE SW. SPARK COIL					87 66	
13			LABOR FOR THESE REPAIRS				31.0		
14			BUT THERE MAY BE MORE FOUND						
15			WHEN REPAIRS ARE NEARLY DONE						
16									
17			Tow to						56
18									
19			There is also a 1400 Rental						
20			car charge from Madison Car Truck						
21			Rentals						
22			REFERENCE 305 13.52						
23									
24									
25			Will have to go this						
26			far minimally. MAY HAVE						
27			ADDITIONAL REPAIR CONCERNS						
28									
29									
30			STORAGE BEING INCURRED						
31			AT \$5.00 / DAY. ALSO						

WRITTEN BY: G. [REDACTED] Y. [REDACTED] OLD PARTS WILL BE DISCARDED UNLESS OTHERWISE INSTRUCTED. TOTALS + 31.0 2290 16

SOMETIMES AFTER THE WORK HAS BEEN STARTED, ADDITIONAL DAMAGES OR WORK PARTS ARE DISCOVERED WHICH WERE NOT EVIDENT ON FIRST INSPECTION. THIS DAMAGE REPORT DOES NOT COVER OR INCLUDE ANY ADDITIONAL PARTS OR LABOR WHICH MAY BE REQUIRED. ALL PARTS PRICES ARE SUBJECT TO INVOICE.

I hereby authorize the above work and acknowledge receipt of copy.
 Signed X [Signature] Date _____

L BODY	hrs. @	
A PAINT	hrs. @	
B FRAME	hrs. @	
R MECH	31.0 hrs. @	2417 00
PARTS Prices subject to Invoice		2290 16
SUBLET/MISCELLANEOUS		
Paint Supplies		
Body Supplies		
Towing/Storage		56 00
EPA Waste Disposal Charge		25 00
OUR TOTAL		4789 16
TAX		367 00
TOTAL		\$ 5052 56



RUSS DARROW-MADISON, Inc.

6525 Odana Road Phone (608) 275-7700
 MADISON, WISCONSIN 53719

Mike Klett (service mgr)