

 DOT Auto Safety Hotline 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		FOR AGENCY USE ONLY 160		
OWNER INFORMATION (Type or Print) [Redacted]				Date Received 20-DEC-2000	Od_or _____ rt_dt _____ od_rt _____ up_ltr _____	
				Reference No. 878814		
				Work Number _____ Home Number _____		
Do you authorize NHTSA to provide a copy of report to the manufacturer of your vehicle? <input 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 _____				Date ____/____/____		
VEHICLE INFORMATION						
Vehicle Ident. No. (VIN.) (Located at bottom of windshield on driver's side)		Vehicle Mak NISSAN TRUCK	Vehicle Mode QUEST	Vehicle Year 1994	Current Odometer Reading	
Purchase Date	Dealer's Name _____		Engine Siz _____ (CID/CC/L) _____	<input type="checkbox"/> Turbo <input type="checkbox"/> Diesel <input type="checkbox"/> Gas <input type="checkbox"/> Fuel Injectio		
<input checked="" type="checkbox"/> New <input type="checkbox"/> Used	City _____ State _____ Zip Code _____		No Cylinders _____			
Transmission Type <input type="checkbox"/> Manual <input type="checkbox"/> Automatic	Antilock Brakes <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Restraint System <input type="checkbox"/> 3-Point Belt <input type="checkbox"/> Driverside Airbag <input type="checkbox"/> Passenge'side Airbag <input type="checkbox"/> Motorbelt <input type="checkbox"/> 2-Point Bel	Cruise Control <input checked="" 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"/> Van <input type="checkbox"/> Minivan <input type="checkbox"/> Other <input type="checkbox"/> Sport Utl <input type="checkbox"/> Truck <input type="checkbox"/> Motorcycle	Body Style <input type="checkbox"/> 2-Door <input type="checkbox"/> 4-Door <input type="checkbox"/> Stationwagon <input type="checkbox"/> Pick Up <input checked="" type="checkbox"/> Truck
FAILED COMPONENT(S)/PART(S) INFORMATION						
Component 06130000	Part Name(s) FUEL:FUEL LINES FITTINGS AND PUMP		Location <input type="checkbox"/> Left <input type="checkbox"/> Fron: <input type="checkbox"/> Right <input type="checkbox"/> Rear	Failed Part(s) <input type="checkbox"/> Original <input type="checkbox"/> Replacement		
No of Failures	Date(s) of Failure(s) _____ Mileage at Failure(s) 11000 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 checked="" type="checkbox"/> No	Fire <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Number of Persons Injured	Number of Fatalitie	Estimated Property Damag	Reported to Polic <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
NARRATIVE DESCRIPTION OF FAILURE(S), INCIDENT(S), INJURY(IES)						
FUEL LINES NEAR ENGINE ARE LEAKING AND HAVE CRACKED, CAUSING FIRE HAZARD. DEALER CLAIMS THAT 6 LINES NEED TO BE REPLACED. PLEASE PROVIDE FURTHER INFORMATION. *AK						
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.						

FOR AGENCY USE ONLY 150

Date Received: 20-DEC-2000

Reference No. 876814

Work Number: [Redacted]

Home Number: [Redacted]

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Vehicle Owner's Questionnaire (VOQ)

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 National Highway Traffic Safety Administration
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 1-888-327-4236
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VEHICLE INFORMATION

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: [Redacted] Date: 1/1/01

Vehicle Ident. No. (VIN) [Redacted]

Vehicle Make: NISSAN TRUCK

Vehicle Model: QUEST

Vehicle Year: 1994

Current Odometer Reading: 113,036

Purchase Date: 1/1

Dealer's Name: Pemberton

City: Norman

State: OK

Zip Code: [Redacted]

Engine Size (CID/CCL): [Redacted]

Engine Type: Turbo Diesel Gas Fuel Injection

Transmission Type: Automatic Manual

Antilock Brakes: Yes No

Restraint System: 3-Point Belt 2-Point Belt Motor Belt

Drive Train: Front Rear 4-Wheel

Vehicle Type: Car Van Minivan Other

Body Style: Sport UM Truck Motorcycle Other

FAILED COMPONENT(S)/PART(S) INFORMATION

Component: 08130000

Part Name(s): FUEL-FUEL LINES FITTINGS AND PUMP

Location: Front Left Right Rear

Failed Part(s): Original Replacement

No of Failures: 2

Date(s) of Failure(s): 12/18/2000

Mileage at Failure(s): 113,036

Vehicle Speed at Failure(s): Parked

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: [Redacted]

Number of Failures: [Redacted]

Estimated Property Damage: [Redacted]

Reported to Police: Yes No

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

FUEL LINES NEAR ENGINE ARE LEAKING AND HAVE CRACKED, CAUSING FIRE HAZARD. DEALER CLAIMS THAT 6 LINES NEED TO BE REPLACED. PLEASE PROVIDE FURTHER INFORMATION. *AK

Note: Bob Howard Nissan did the repair + described the defect to me after the repair which I taped. The taped description does NOT match the invoice enclosed. The gas leak was near the engine and gasoline fumes filled the hood and in the passenger compartment

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