Moisten Here Moisten Here Moisten Here

Form Approved: O.M.B. No. 2127-0008

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

Use a No. 2 pencil or a blue or black ink pen only.
CORRECT MARK: ●

FOR AGENCY USE ONLY
Date Received: 6/12/01
Reference No.

OWNER INFORMATION (Type or Print)

DAYTIME TELEPHONE NUMBER

[redacted]

VEHICLE INFORMATION

VEHICLE IDENT. NO. (VIN) (Located at bottom of windshield on driver's side)	VEHICLE MAKE	VEHICLE MODEL	MANUFACTURE DATE	MODEL YEAR
JN1RZ27H6PX002425	NISSA	300	1993	● 1 9 9 3

VEHICLE MANUFACTURER
○ BMW ○ Ford ○ Honda ● Nissan ○ Subaru ○ Volvo ○ Other
○ Daimler/Chrysler ○ General Motors ○ Hyundai ○ Saab ○ Toyota ○ VW

PURCHASE DATE		DEALER'S NAME	CITY	STATE	ZIP CODE
8/25/96	● New ○ Used	THRUWAY NISSAN	1KO Rt 28 Kingston	NY	12401

ENGINE SIZE (CID/CC/L) ______ NO. CYLINDERS 6
FUEL SYSTEM: ○ Turbo ● Fuel Injection
FUEL TYPE: ○ Diesel ● Gas
TRANSMISSION TYPE: ○ Manual ● Automatic
ANTILOCK BRAKES: ○ Yes ○ No
RESTRAINT SYSTEM: ● Driverside Airbag ○ Passengerside Airbag ○ 3 Point Belt ○ 2-Point Belt ○ Motorbelt
CRUISE CONTROL: ● Yes ○ No

DRIVETRAIN: ○ Front ○ 4 Wheel ● Rear
VEHICLE TYPE: ● Car ○ Van ○ Minivan ○ Sport Utility ○ Truck ○ Motorcycle ○ Other Convertible
DOORS: ● 2 Door ○ 4-Door
BODY STYLE: ○ Hatchback ○ Pick Up Truck ○ Sedan ○ Stationwagon

FAILED COMPONENT(S)/PART(S) INFORMATION

COMPONENT
○ Child Seat
○ Electrical Lights & Alarms
○ Engine & Cooling System
○ Equipment
○ Fuel System, Exhaust
○ Heater, Defrost, Ventilation
○ Interior
○ Parking Brake
○ Power Train
○ Service Brakes
○ Steering
○ Structure
○ Suspension
○ Visual Systems
○ Other POWER TRANSISTOR

NO. OF FAILURES: 3

INCIDENT DATE: 5/24/01
MILEAGE AT INCIDENT: 80100
VEHICLE SPEED AT INCIDENT: 40 mil.

FAILED PART(S): ● Original ○ Replacement

To report defective or failed tires provide the following: Tire Brand, Tire Name, Tire Size (include all number and letters).

TIRE NAME | **COMPLETE TIRE SIZE**

TIRE BRAND
○ BF Goodrich
○ Cooper
○ Firestone
○ Goodyear
○ Kelly Springfield
○ Michelin
○ Yokohama
○ Other ______

HANDICAPPED ADAPTIVE: ○ Yes ● No
FAILED PART(S) AVAILABLE?: ● Yes ○ No
NHTSA PREVIOUSLY CONTACTED?: ○ Yes ● No

APPLICABLE 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

CAUSE OF INCIDENT
○ Wear/Corroded/Rust ○ Noisy
○ Weak/Poor Fit/Loose ○ Leaks
○ Cut/Torn ○ Short
○ Disconnect/Fell Off ○ Locks/Sticks/Grabs
○ Erratic/Poor Performance ○ Stability/Vibration
○ Excessive Effort ○ Broken

RESULT OF INCIDENT
○ Explosion/Fire
○ Loss of Control
○ Poor Visibility
○ Inadvertent Start
○ Rollover
● Stalls
○ Sudden Acceleration

PLEASE DO NOT WRITE IN THIS AREA

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