



# RECALL CAMPAIGN BULLETIN

Reference:

NTB17-044

Date:

April 26, 2017

## VOLUNTARY SAFETY RECALL CAMPAIGN 2017 VERSA SEDAN AND VERSA NOTE FRONT PASSENGER AIR BAG MODULE

**CAMPAIGN ID #:** PM679

**APPLIED VEHICLES:** 2017 Versa Sedan (N17)  
2017 Versa Note (E12)

**Check Service COMM to confirm campaign eligibility.**

### INTRODUCTION

Nissan is conducting a Voluntary Safety Recall Campaign on certain specific model year 2017 Versa Sedan and Versa Note vehicles to replace the front passenger air bag module. This service will be performed at no charge to the customer for parts or labor.

### IDENTIFICATION NUMBER

Nissan has assigned identification number PM679 to this campaign. This number must appear on all communication and documentation of any nature dealing with this campaign.

### DEALER RESPONSIBILITY

It is the dealer's responsibility to check Service Comm for the campaign status on each vehicle falling within the range of this voluntary safety recall which for any reason enters the service department. This includes vehicles purchased from private parties or presented by transient (tourist) owners and vehicles in a dealer's inventory. **Federal law requires that new vehicles in dealer inventory which are the subject of a safety recall must be corrected prior to sale. Failure to do so can result in civil penalties by the National Highway Traffic Safety Administration.** While federal law applies only to new vehicles, Nissan strongly encourages dealers to correct any used vehicles in their inventory before they are retailed.

Nissan Bulletins are intended for use by qualified technicians, not 'do-it-yourselfers'. Qualified technicians are properly trained individuals who have the equipment, tools, safety instruction, and know-how to do a job properly and safely. NOTE: If you believe that a described condition may apply to a particular vehicle, DO NOT assume that it does. See your Nissan dealer to determine if this applies to your vehicle.

## REQUIRED SPECIAL TOOL

### Quick Scan Tool (J-52352)

- Each retailer has been shipped one Quick Scan Tool (J-52352).
- Additional tools can be obtained from Tech-Mate at 1-800-662-2001.



Figure A

## SERVICE PROCEDURE

**IMPORTANT:** Follow all cautions, warnings, and notes in the Electronic Service Manual (ESM) when working on or near a Supplemental Restraint System (SRS), such as an air bag.

**CAUTION:** Handle interior trim carefully to avoid damage. Work with clean hands and clean tools to avoid dirt and stains. Use protective covers as needed.

1. Write down the radio settings.

| Presets | 1      | 2 | 3       | 4 | 5    | 6                  |
|---------|--------|---|---------|---|------|--------------------|
| AM      |        |   |         |   |      |                    |
| FM 1    |        |   |         |   |      |                    |
| FM 2    |        |   |         |   |      |                    |
| SAT 1   |        |   |         |   |      |                    |
| SAT 2   |        |   |         |   |      |                    |
| SAT 3   |        |   |         |   |      |                    |
| Bass    | Treble |   | Balance |   | Fade | Speed Sen.<br>Vol. |

2. Turn the ignition OFF.
3. Disconnect both battery cables, negative cable first.
4. Wait at least 3 minutes.

5. Remove the new passenger air bag module (module) from its packing and register the module number as follows:

- The new module is listed in the Parts Information.

- a. Attach the quick scan tool (J-52352) to your CONSULT PC USB port.

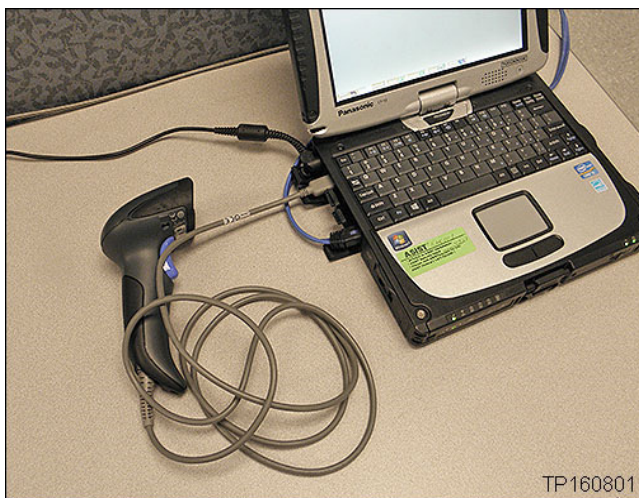


Figure 1

- b. On the left side of the ASIST main menu, select **Tech Support Info**, then **Inventory Vehicle Actions**.

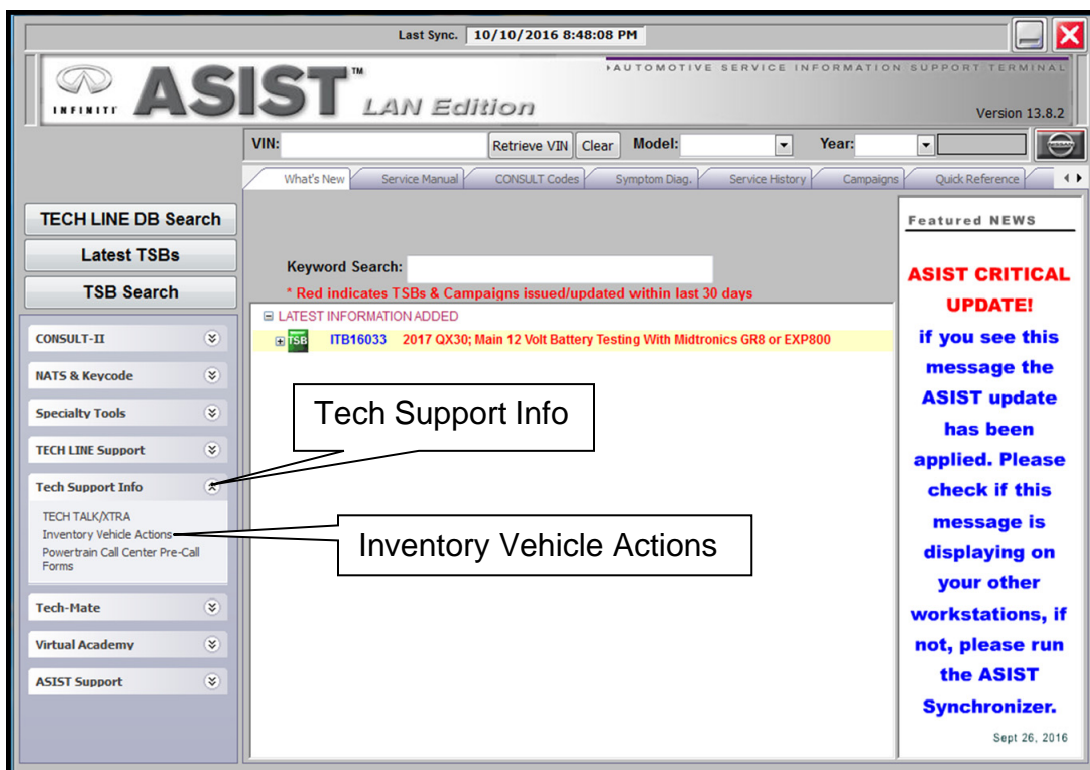


Figure 2

- c. Select **CLICK HERE** (Air Bag to VIN Registration).

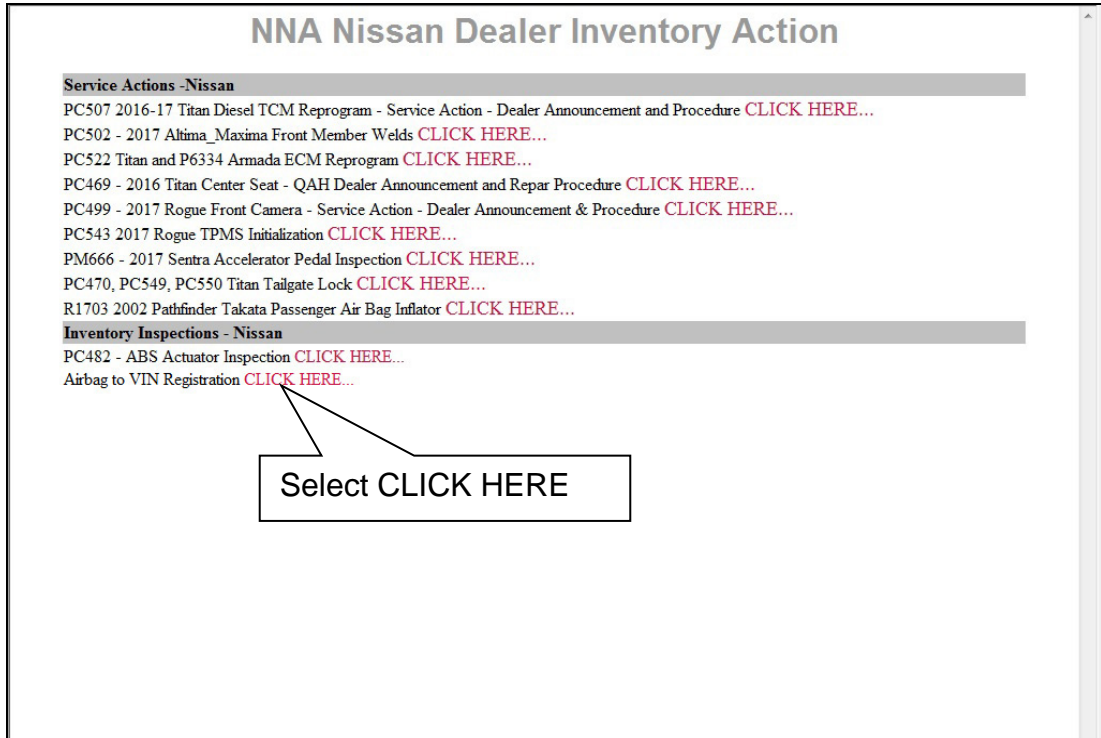


Figure 3

- d. Use the quick scan tool to scan the bar code (VIN) on the B-pillar label.

- Make sure the label is clean.

**NOTE:**

- Some labels may not scan quickly.
- Hold the scan tool approximately 6 inches away from the label.
- Hold the trigger down until the label is read (this may take several seconds).



Figure 4

- VIN will automatically populate (see Figure 5).
- If needed, VIN can be entered manually.

[Airbag to VIN Registration](#)

11/28/2016 1:36:32 PM

**Please enter/scan the VIN and Airbag Inflator Serial Number**

**Dealer Code**

**Key Number**

**VIN**

**Airbag Serial Number**

Step f; see next page.

(Select submit after both fields are populated).

Figure 5

- e. Use the quick scan tool to scan the bar code (serial number) on the new air bag module.
- The serial number will automatically populate (see Figure 5 on previous page).

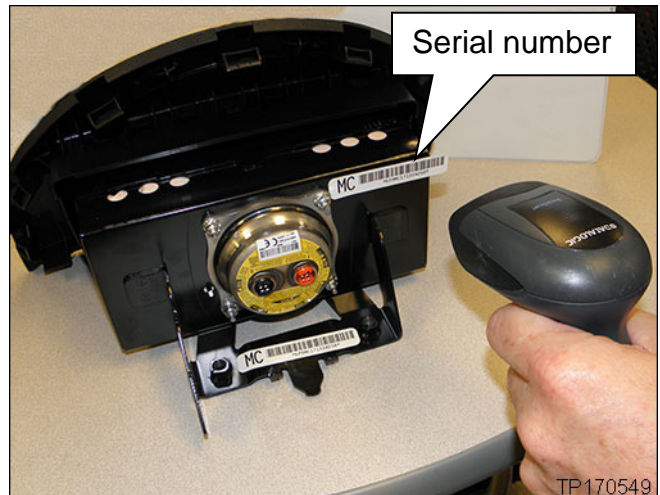


Figure 6

**NOTE:**

- If needed, the serial number can be entered manually.
- DO NOT use the asterisks.

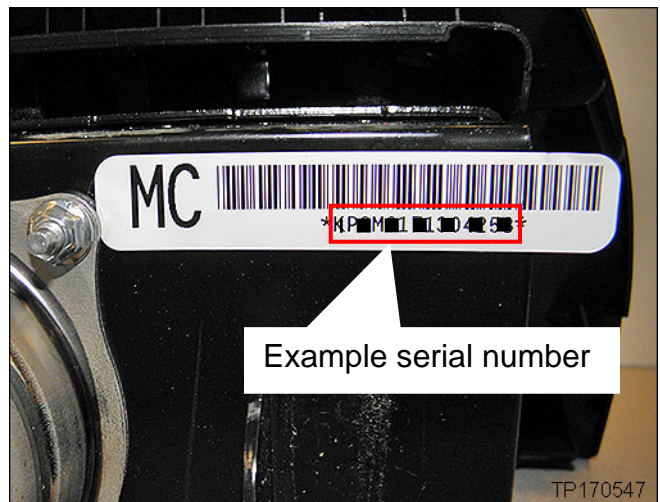


Figure 7

- f. Select **Submit** on the ASIST screen (see Figure 5 on the previous page).

6. Replace the front passenger air bag module with the new one.
  - Refer to the Electronic Service Manual (ESM), section SRS-Supplemental Restraint System, for replacement information.
7. Re-connect both battery cables – positive cable first.
8. Reset/reinitialize systems as needed.
  - Refer to the ESM, section PG-Power Supply, Ground & Circuit Elements, for a listing of systems that require reset/initialization after reconnecting the 12 V battery.
  - Look in the PG section index for ADDITIONAL SERVICE WHEN REMOVING BATTERY NEGATIVE TERMINAL.
  - This list often includes items such as radio, power windows, clock, sunroof, etc.
9. Turn the ignition from OFF to ON and observe the air bag warning light:
  - Light should illuminate for 7 seconds and then go out.

**NOTE:** If the Air Bag Warning light does not operate as described above there may be an issue not covered by this campaign. Refer to ASIST and the ESM for additional diagnostic and repair information.

## PARTS INFORMATION

| DESCRIPTION   | MODEL/COLOR                    | PART NUMBER   | QUANTITY |
|---|--------------------------------|---------------|----------|
| MODULE ASSY-AIR BAG, ASSIST<br>(Front passenger air bag module) | Versa Sedan /<br>Charcoal (G)  | 98515 – 9KK8A | 1        |
|   | Versa Sedan /<br>Sandstone (K) | 98515 – 9KK8B |          |
|   | Versa Note                     | 98515 – 9MC8A |          |

**NOTE:** Return the old/non deployed air bag module using the [Air Bag Module Return Instructions](#) on the next page.

## CLAIMS INFORMATION

Submit a “CM” line claim using the following claims coding:

| CAMPAIGN (“CM”) I.D. | DESCRIPTION                               | MODEL       | OP CODE | FRT      |
|----------------------|---|-------------|---------|----------|
| PM679                | Replace front passenger<br>air bag module | Versa Sedan | PM6790  | 0.6 hrs. |
|                      |   | Versa Note  | PM6791  | 0.8 hrs. |

## AIR BAG MODULE RETURN INSTRUCTIONS

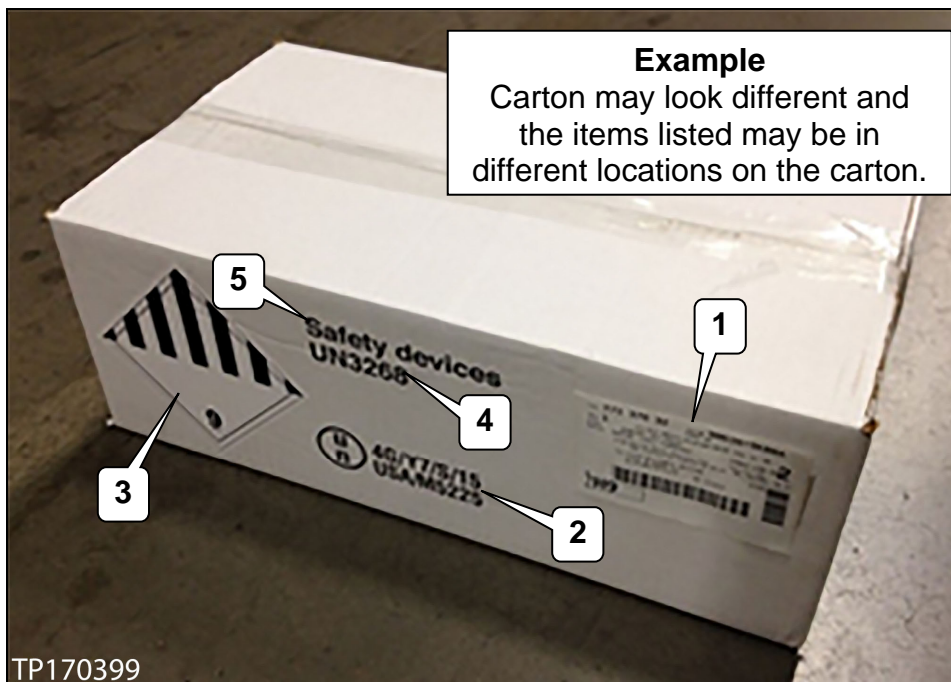
**NOTE: DO NOT DEPLOY THE USED/NON-DEPLOYED AIR BAG MODULE REMOVED FROM THE VEHICLE.**

### Returns via YRC Reverse Logistics (for non DDS dealers)

#### Packaging Instructions

**NOTE:** Individuals preparing hazardous material ('Hazmat') shipments are required to be trained in accordance with the Code of Federal Regulations, Title 49, section 172.704.

1. Place the used/non-deployed air bag module from the vehicle in the carton that the new air bag module was received in. Be sure to package the used module the same way as the new module. Include any packing material that was used to ship the new module in the carton with the used module.
2. Seal the carton with 3 inch clear tape across the flaps and along the edges to securely close the carton.
3. Verify that the Class 9 hazardous material diamond, UN ID (UN3268), and the proper shipping name (safety devices) are still clearly visible on the carton and are not covered or obstructed in any way.



Required markings:

- |                                      |                         |
|--------------------------------------|-------------------------|
| 1. Transportation information        | 4. ID number            |
| 2. UN specification package markings | 5. Proper shipping name |
| 3. Labels                            |                         |

4. Write on top of the carton: "Campaign".

## Shipping Instructions

**NOTE: Please accumulate a minimum of 10-15 air bag modules prior to contacting the YRC Reverse Logistics call center to arrange for the pick-up of the modules.**

1. Call the YRC Reverse Logistics call center at 1-800-357-9199 and tell the operator that you need to return Campaign air bag modules to your servicing PDC.
2. Provide the call center with the name, address and telephone of your servicing PDC.
3. Provide your dealership name, address and telephone number.
4. Provide the number of air bag modules being returned and the total weight.
5. The YRC Reverse Logistics team will fax/email you a copy of the completed Bill of Lading and shipping labels for the shipment.
6. The YRC Reverse Logistics call center will notify the local YRC terminal to pick up the air bag modules at your dealership.
  - Please do **NOT** call the local YRC terminal to schedule the pick-up.
7. Place the packaged air bag modules and completed Bill of Lading aside for pick up by the carrier.

## Returns via DDS

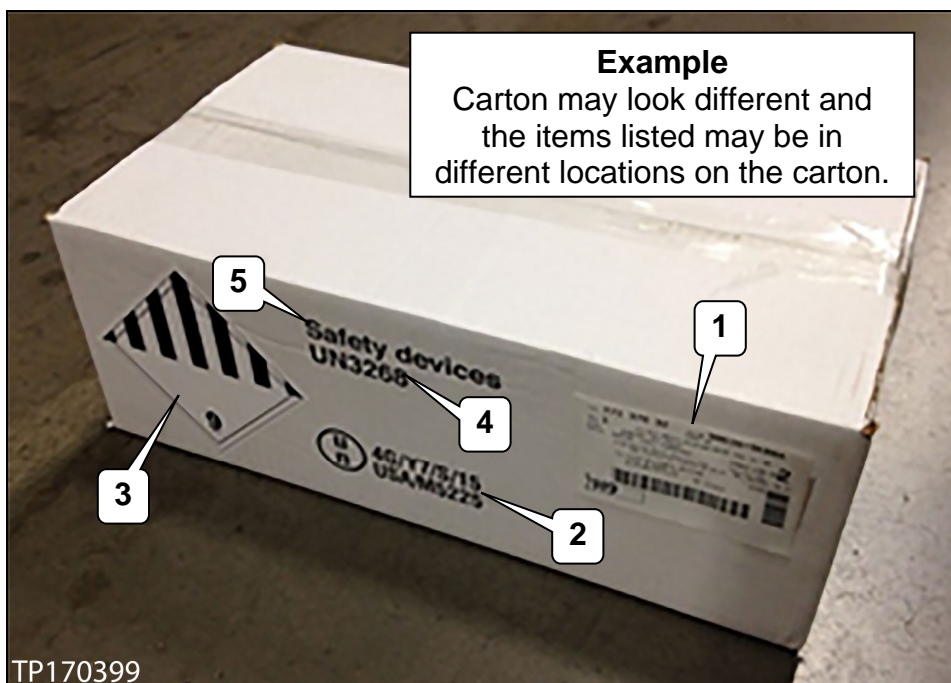
### **Packing Instructions:**

**NOTE:** Individuals preparing hazardous material ('Hazmat') shipments are required to be trained in accordance with the Code of Federal Regulations, Title 49, section 172.704.

1. Place the used/non-deployed air bag module from the vehicle in the carton that the new air bag module was received in. Be sure to package the used module the same way as the new module. Include any packing material that was used to ship the new module in the carton with the used module.

**NOTE:** The carton must be in like new condition.

2. Seal the carton with 3 inch clear tape across the flaps and along the edges to securely close the carton.
3. Verify that the Class 9 hazardous material diamond, UN ID (UN3268), and proper shipping name (safety devices) are still clearly visible on the carton and are not covered or obstructed in any way.



Required markings:

- |                                      |                         |
|--------------------------------------|-------------------------|
| 1. Transportation information        | 4. ID number            |
| 2. UN specification package markings | 5. Proper shipping name |
| 3. Labels                            |                         |

4. Write on top of the carton "Campaign".

**Bill of Lading Instructions (refer to example on the next page):**

Use the blank Bill of Lading on page 14 and enter the following:

1. Servicing PDC name, address & telephone number.
2. Date of the shipment.
3. Dealership name and address as indicated on the sample Bill of Lading.
4. Number of packages being shipped on line 1.
5. Total weight of the packages being shipped on line 1.
6. Total number of packages being shipped.
7. Total weight of the packages being shipped.
8. Print the name of the Hazmat trained/certified employee and have him/her sign as shown on sample Bill of Lading.
9. Print the name of the DDS carrier that will be transporting the air bag modules back to your servicing PDC.

**Shipping Instructions:**

Place the packaged air bag cartons and completed Bill of Lading in DDS delivery area for DDS driver pick up.

|   |                |   |                 |  |   |   |   |
|---|----------------|---|-----------------|--|---|---|---|
| <b>SHIPPER<br/>PLEASE NOTE</b>  |                | <b>FREIGHT CHARGES ARE PREPAID<br/>ON THIS BILL OF LADING UNLESS<br/>MARKED COLLECT</b> |                 | <b>CARRIER<br/>PLEASE NOTE</b>   |   | <b>IF SINGLE SHIPMENT<br/>CHECK BOX BELOW</b> |   |
| PLACE PRO LABEL HERE  |                |   |                 | <b>STRAIGHT BILL OF LADING</b>   |   |   |   |
|   |                |   |                 | ORIGINAL - NOT NEGOTIABLE<br>SINGLE SHIPMENT PICKUP <input checked="" type="checkbox"/>                                      |   |   |   |
| DATE <span style="border: 1px solid black; border-radius: 50%; padding: 2px 5px;">2</span>  |                |   |                 | P.O. NO.   |   | SHIPPER NO.                                   |   |
| CONSIGNEE (TO)<br><b>Servicing PDC Name</b>   |                |   |                 | SHIPPER (FROM)<br><b>Dealer Name</b>   |   |   |   |
| STREET<br><b>Servicing PDC Street Address</b> <span style="border: 1px solid black; border-radius: 50%; padding: 2px 5px;">1</span>   |                |   |                 | STREET<br><b>Dealer Street Address</b> <span style="border: 1px solid black; border-radius: 50%; padding: 2px 5px;">3</span> |   |   |   |
| CITY, STATE, ZIP<br><b>Servicing PDC City, State and Zip</b>  |                |   |                 | CITY, STATE, ZIP<br><b>Dealer City, State and Zip</b>  |   |   |   |
| PHONE NO.<br><b>Servicing PDC Tel. No.</b>  |                | ROUTE   |                 |  | VEHICLE NO.   |   |   |
| <b>NUMBER<br/>SHIPPING<br/>UNITS</b>  | <b>H<br/>M</b> | <b>KIND OF PACKAGING, DESCRIPTION OF ARTICLES, SPECIAL MARKS AND EXCEPTIONS</b>         | <b>NMFC No.</b> | <b>CLASS</b>   | <b>WEIGHT (LBS)<br/>(Subject to<br/>Correction)</b>                                   |   |   |
| <span style="border: 1px solid black; border-radius: 50%; padding: 2px 5px;">4</span>   | X              | <b>4G BOXES X 9.0 LBS</b>   | <b>19697</b>    | <b>55</b>  | <span style="border: 1px solid black; border-radius: 50%; padding: 2px 5px;">5</span> |   |   |
|   |                | <b>UN3268, DEVICES, 9</b>   |                 |  |   |   |   |
|   |                | <b>EX-1993040309</b>  |                 |  |   |   |   |
|   |                | <b>NO PLACARDS REQUIRED PER 49CFR 172.504(F)(9)</b>                                     |                 |  |   |   |   |
|   |                | <b>2016 ERG 171</b>   |                 |  |   |   |   |
|   |                |   |                 |  |   |   |   |
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|   |                |   |                 |  |   |   |   |
|   |                |   |                 |  |   |   |   |
| <span style="border: 1px solid black; border-radius: 50%; padding: 2px 5px;">6</span>   | ◀ TOTAL        |   |                 |  | TOTAL ▶   |   | <span style="border: 1px solid black; border-radius: 50%; padding: 2px 5px;">7</span> |
| <b>EMERGENCY CONTACT: CONTACT MUST BE AVAILABLE 24/7, 365 days per year</b>   |                |   |                 |  |   |   |   |
| THIS IS TO CERTIFY THAT THE ABOVE NAMED MATERIALS ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED AND LABELED AND ARE IN PROPER CONDITION FOR TRANSPORT ACCORDING TO THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION. |                |   |                 |  |   |   |   |
| SHIPPER<br><b>Hazmat Trained Person</b>   |                |   |                 | CARRIER<br><b>DDS Carrier Name</b> <span style="border: 1px solid black; border-radius: 50%; padding: 2px 5px;">9</span>     |   |   |   |
| AUTHORIZED SIGNATURE<br><b>Hazmat Trained Person's Signature</b> <span style="border: 1px solid black; border-radius: 50%; padding: 2px 5px;">8</span>  |                |   |                 | AUTHORIZED SIGNATURE<br><b>Carrier Driver Signature</b>  |   | DATE<br><b>04/12/17</b>                       |   |

NUMBER OF PIECES RECEIVED ▲

|  |                |   |  |   |              |   |  |
|--|----------------|---|--|---|--------------|---|--|
| <b>SHIPPER<br/>PLEASE NOTE</b> ▶   |                | <b>FREIGHT CHARGES ARE PREPAID<br/>ON THIS BILL OF LADING UNLESS<br/>MARKED COLLECT</b> |  | <b>CARRIER<br/>PLEASE NOTE</b> ▶  |              | <b>IF SINGLE SHIPMENT<br/>CHECK BOX BELOW</b>       |  |
| PLACE PRO LABEL HERE   |                |   |  | <b>STRAIGHT BILL OF LADING</b><br><b>ORIGINAL - NOT NEGOTIABLE</b><br><b>SINGLE SHIPMENT PICKUP <input checked="" type="checkbox"/></b> |              |   |  |
|  |                |   |  |   |              |   |  |
| CONSIGNEE (TO)   |                |   |  | SHIPPER (FROM)  |              |   |  |
| STREET   |                |   |  | STREET  |              |   |  |
| CITY, STATE, ZIP   |                |   |  | CITY, STATE, ZIP  |              |   |  |
| PHONE NO.  |                | ROUTE   |  | VEHICLE NO.   |              |   |  |
| <b>NUMBER<br/>SHIPPING<br/>UNITS</b>   | <b>H<br/>M</b> | <b>KIND OF PACKAGING, DESCRIPTION OF ARTICLES, SPECIAL MARKS AND EXCEPTIONS</b>         |  | <b>NMFC No.</b>   | <b>CLASS</b> | <b>WEIGHT (LBS)<br/>(Subject to<br/>Correction)</b> |  |
|  |                |   |  |   |              |   |  |
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|  |                |   |  |   |              |   |  |
|  |                |   |  |   |              |   |  |
| ◀ TOTAL  |                | TOTAL ▶   |  |   |              |   |  |
| <b>THIS IS TO CERTIFY THAT THE ABOVE NAMED MATERIALS ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED,<br/>MARKED AND LABELED AND ARE IN PROPER CONDITION FOR TRANSPORT ACCORDING TO THE APPLICABLE<br/>REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.</b> |                |   |  |   |              |   |  |
| SHIPPER  |                |   |  | CARRIER   |              |   |  |
| AUTHORIZED SIGNATURE   |                |   |  | AUTHORIZED SIGNATURE  |              | DATE  |  |

NUMBER OF PIECES RECEIVED ▲