



U.S. Department
of Transportation
**National Highway
Traffic Safety
Administration**

DOT Auto Safety Hotline
Vehicle Owner's Questionnaire
To Report Vehicle Safety Defects
1-888-DASH-2-DOT
(1-888-327-4236)
INTERNET:www.nhtsa.dot.gov/hotline

FOR AGENCY USE ONLY 100148

Date Received 12-AUG-2003
Repository
Reference No. 10032608

OWNER INFORMATION (Type or Print)

Name
Address
City KENNER State LA Zip Code
Daytime Telephone Number E-mail Address
Evening Telephone Number

Do you authorize NHTSA to provide a copy of this report to the manufacturer of your vehicle? YES NO
In the absence of an authorization, NHTSA WILL NOT provide your name or address to the vehicle manufacturer.
Signature of Owner _____ Date ____/____/____

VEHICLE INFORMATION

17 digit Vehicle Identification Number Located at bottom of windshield on driver's side: 1N4AL11DX2C
Make: NISSAN Model: ALTIMA Model Year: 2002
Date Purchased: 26-SEP-01 Dealer's Name and Telephone Number: _____ Engine: No: Cylinders 4 Fuel Type: Gas
Original Owner Dealer's City: _____ State: _____ Zip Code: _____
Transmission Type: AUTOMATIC Antilock Brakes Cruise Control Powertrain: FRONT WHEEL DRIVE Vehicle Component Code: 012200 STEERING:COLUMN LOCKING:ANTI-THEFT DEVICE
Multiple Failure: 1

FAILED COMPONENT(S)/PART(S) INFORMATION

Incident Date(s): 23-JUL-2003 Failure Mileage: 23000 Failure Speed: 5

ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A TIRE FAILURE

Tire Make: _____ Tire Model (Name or Number): _____ Tire Size (Example P215/65R15): _____
DOT No. (Example: DOTM9ABC036) Original Equipment Prior Repair Failure Location: _____
Tire Component Code: _____ Tire Failure Type: _____

ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A CHILD SEAT FAILURE

Make: _____ Date Manufactured: _____ Model No./Name: _____
Seat Type: _____ Installation System: _____
Child Seat Component Code: _____ Failed Part: _____

APPLICABLE INCIDENT INFORMATION

(Please describe in detail the incident(s), Failure(s), Crash(es), and injury(ies).)

Crash Yes No Fire Yes No
Number of Persons Injured: _____ Number of Deaths: _____ Reported to Police: N

Narrative Description of Incident(S), Crash(es), and Injury(ies).
Please describe (1) events leading up to the failure, (2) failure and its consequences, and (3) what was done to correct the failure; i.e. parts repaired or replaced (and if old part is available).

I WAS DRIVING WHEN I ATTEMPTED TO MAKE A RIGHT TURN, MY STEERING WHEEL LOCKED UP, THE VEHICLE SKIDDED AND STALLED IN THE MIDDLE OF AN INTERSECTION. I WAS DRIVING AND MY 14 MONTH OLD WAS IN THE BACK SEAT. I HAD THE VEHICLE TOWED TO THE NEAREST DEALERSHIP. I FEW HOURS LATER I WAS CONTACTED BY THE ASSISTANT MANAGER OF THE SERVICE DEPARTMENT WHERE I WAS INFORMED THAT THE CRANK SHAFT POSITIONING SENSOR HAD GONE OUT. THE PART HAD TO BE ORDERED SO I WAS TOLD THAT I COULD BE WITHOUT MY VEHICLE FOR A DAY OR MAYBE EVEN A WEEK. I WAS INFORMED THAT THERE WERE OTHER VEHICLES IN THE SHOP WAITING FOR SIMILAR PARTS. MY VEHICLE HAS BEEN IN THE SHOP FOR 20 DAYS NOW AND I JUST KEEP GETTING THE RUN-AROUND. THIS IS PROBABLY A PART THAT WILL EVENTUALLY NEED TO BE RECALLED BUT I GUESS NISSAN IS WAITING FOR A TRADEGY TO OCCUR BEFORE THEY TAKE ACTION. *AK

Include, if available: Police/Fire Department Report, Photos, and Repair Invoice.

ATTACH ADDITIONAL SHEETS IF NECESSARY

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 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.