



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 100184

Date Received

02-OCT-2003

Repository

Reference No.
10042193

OWNER INFORMATION (Type or Print)

Name

Address

City GERMANTOWN

State MD

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
3N1CB51DX1L

Make
NISSAN

Model
SENTRA

Model Year
2001

Date Purchased

Dealer's Name and Telephone Number

Engine:
No: Cylinders

Fuel Type:

Original Owner

Dealer's City

State

Zip Code

Transmission Type

Antilock Brakes
 Cruise Control

Powertrain

Vehicle Component Code
061000 ENGINE AND ENGINE COOLING:ENGINE

Multiple Failure: 1

FAILED COMPONENT(S)/PART(S) INFORMATION

Incident Date(s)
29-SEP-2003

Failure Mileage
45000

Failure Speed
35

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
0

Number of Deaths
0

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).

WHILE DRIVING AT 35 MPH VEHICLE STALLED AND SHUT DOWN IN THE MIDDLE OF THE HIGHWAY. BEFORE TOTAL SHUT DOWN STEERING WHEEL AND BRAKES LOCKED UP, ALMOST RESULTING IN AN ACCIDENT. VEHICLE WAS TAKEN TO THE DEALER, WHO IN TURN INFORMED THE CONSUMER THAT THE CRANK POSITIONING SENSOR WAS DEFECTIVE. THERE WAS A RECALL ON THIS VEHICLE, BUT NOT FOR CONSUMER'S VIN NUMBER. THE DEALER WANTED TO CHARGE CONSUMER FOR RECALL REPAIRS. MANUFACTURER WAS NOTIFIED OF THE PROBLEM. *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.