



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 252

Date Received
03-SEP-2004
Repository
Reference No.
10090402

OWNER INFORMATION (Type or Print)

Name
Address
City LOVES PARK State IL 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
Make NISSAN Model MAXIMA Model Year 1989
Date Purchased Dealer's Name and Telephone Number Engine: No: Cylinders 6 Fuel Type: Gas
Original Owner Dealer's City State Zip Code
Transmission Type AUTOMATIC Antilock Brakes Cruise Control Powertrain REAR WHEEL DRIVE
Vehicle Component Code 103000 POWER TRAIN:AUTOMATIC TRANSMISSION
Multiple Failure: 2

FAILED COMPONENT(S)/PART(S) INFORMATION

Incident Date(s) 03-SEP-2004
Failure Mileage
Failure Speed

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).

CONSUMER COULD MOVE THE SHIFTER ON ITS OWN OUT OF PARK WITHOUT APPLYING FORCE. ALSO, STEERING COLUMN FAILED TO LOCK. CONSUMER WILL CONTACT THE DEALER FOR AN APPOINTMENT. *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.