



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 100079

Date Received

2008 NOV 19 PM 3: 21
25-AUG-2009

Repository

Reference No.
10034563

OWNER INFORMATION (Type or Print)

Name: [REDACTED]
Address: [REDACTED]
City: SILVER SPRING State: MD Zip Code: [REDACTED]

Daytime Telephone Number: [REDACTED] 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: 1/1/

VEHICLE INFORMATION

17 digit Vehicle Identification Number Located at bottom of windshield on driver's side: _____ Make: MAZDA Model: PROTEGE Model Year: 1999
Date Purchased: _____ Dealer's Name and Telephone Number: _____ Engine: _____ Fuel Type: _____
Original Owner: Dealer's City: _____ State: _____ Zip Code: _____
Transmission Type: Antilock Brakes Powertrain: _____ Vehicle Component Code: 190000 TIRES
 Cruise Control Multiple Failure: 1

FAILED COMPONENT(S)/PART(S) INFORMATION

Incident Date(s): 25-AUG-2009 Failure Mileage: _____ Failure Speed: _____

ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A TIRE FAILURE

Tire Make: FIRESTONE Tire Model (Name or Number): FIRESTONE Tire Size (Example P215/65R15): P185/65R14
DOT No. (Example: DOTM15ABC136): H406JDNO79 Original Equipment Prior Repair Failure Location: _____
Tire Component Code: 191000 TIRES; TREAD/BELT 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), cause(s), 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), Cause(s), 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).

TIRE TREAD SEPARATED FROM TIRE AND DAMAGED THE FENDER WHILE DRIVING AT NORMAL SPEED. FIRESTONE, SIZE P185/65R14, DOT# H406JDNO79. DEALER NOTIFIED. *AK

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

ATTACH ADDITIONAL SHEETS IF NECESSARY.

The Privacy Act of 1974 (Public Law 93-502) 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 to 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.

7/8/2003

[Redacted]
Nashville, TN

[Redacted]
SILVER SPRING, MD

Ref #: [Redacted]

In response to your phone call regarding the situation you experienced with your tire, listed below are the items that are required to process your claim for consideration:

1. Complete and sign the enclosed Incident Report.
2. Two estimates for the repair of your vehicle from a repair facility you would use. Photos of the damage are helpful, and can also be sent with the estimates.
3. A copy of the replacement tire invoice and a legible shipping cost receipt.
4. Also, the tire that caused the damage must be shipped to us prepaid.

Upon receipt of all of the above items, we will advise you in writing of our decision, usually within 30 days. Please make a copy of the paperwork, estimates and receipts for your own files.

The tire that caused the alleged property damage to your vehicle must be shipped freight prepaid to the address shown on the enclosed shipping label. Your shipping cost will vary depending upon the shipment method you use. For reference, UPS, Ground Service, will cost about \$15 - \$30 for a passenger car tire. The freight company may require that you package the tire in a box for shipment. If we conclude that the claim should be accepted after we examine the tire, we will reimburse you for the cost of shipping the tire to us. If we conclude that the claim is denied and you request that your tire be returned after the inspection, it will be shipped by us freight collect. The estimated freight collect shipping cost is about \$30.

See the attached "Help Us Help You" for details regarding the process and instructions for Shipping Your Tire And The Requested Paperwork.

Following the included instructions and using the enclosed materials will expedite our review process.

Please keep in mind that any tire, no matter how well constructed, may fail in use as a result of punctures, impact damage, improper inflation, overloading, or other conditions resulting from use or misuse for which we are not responsible. Many of the submitted tires we receive failed for one of these reasons above and the claims are accordingly denied for payment.

Thank you for your cooperation. If you have any questions, please feel free to contact us at 1-800-358-4844.

INCIDENT REPORT

(2)

Time and Place	Date of Incident JULY 6 th 2003	Time AM/PM 2:30 - 3:30	Exact Location Where Incident Occurred 495 @ EXIT 30 COLUMBIA RD SILVER SPRING		
Customer Vehicle	Vehicle Make MAZDA	Year 1999	Model PROTEGE	Mileage 66,500	
	Owner of Auto				
	City SILVER SPRING		State MD		
	Minor Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>				
	City SILVER SPRING		State MD		
	Passenger (List All) (2) LISTED ABOVE		Minor Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Telephone Number SAME AS ABOVE	
	Address SAME AS ABOVE		City	State	Zip Code
Vin Number JM1BJ222X0159456		Trailer Hitch? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>		What is Towed?	
Vehicle Usage Recreational <input type="checkbox"/> Personal <input checked="" type="checkbox"/> Commercial <input type="checkbox"/>		Is this a motorhome or conversion van? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Has the vehicle been modified? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> If Yes? What is Model? If so, how?			
Property Damage to Customer's Car	Did the vehicle rollover? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>		Was the vehicle involved in a crash? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>		
	Damage to Customer Vehicle SEE ATTACHED FROM GEICO & DARCAS TOYOTA		Estimated Cost SEE ATTACHED		
	Have you submitted this to your insurance company? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>				
	Are you planning to submit this claim to insurance company? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>				
	Has your vehicle been repaired? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> IN PROCESS OF BEING REPAIRED BY 7/31/03 (MAYBE) DEDUCTIBLE AMOUNT \$ 500.00				
Customer Insurance Co. (Please include telephone number) GEICO 1-800-424-6443					
Property Damage to Other Car (if applicable)	Was another Vehicle involved? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>		Name and Address N/A		
	Damage N/A		Estimated Cost N/A		
	Does Owner of Vehicle Have Insurance? Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	Covering Damages to Car? Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	Covering Damages to Other Car? Yes <input type="checkbox"/> No <input type="checkbox"/> N/A		
	Other Property Damage N/A				
Injured Person	Was Anyone Injured? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NOT PHYSICALLY				
Nature of Injury	KAREN IS 6 MONTHS PREGNANT. AFTER INCIDENT, RODE W/ OTHER FAMILY				
Tire Data (if available)	Size-Type P185/65R14-85S	Mileage on Tire 66,500	DOT Number (10 or 11 digit # located on sidewall) DOT H406 JDN079	Position Mounted	
Description of Incident	ON 7/6/03 between 2:30pm - 3:30pm ON MD 495 towards Silver Spring The car and steering wheel started shaking. We turned off AC, radio, & reduced speed and was listening to find out what maybe the cause. Two exits from ones we heard a thud. I pulled over and found the right rear fender up to the curve was hanging off and the right rear tire was bald. All the threads on the ^{side} face of the tire were gone. We changed the tire, secured the fender with duct tape &				
Signature of Customer	I certify I am the driver of a new tire.		Date Signed 7/18/03		

(4)

REF. No. 910881

8/6/2003

Subject: Inspection Of Tire

Dear Mr. [REDACTED]

Our office has received your tire (FR680, P185/65R14 DOT No.H406JDN079) and it has been inspected by our Technical Services Manager.

We have carefully inspected the tire. That inspection showed that this tire was operated for an unknown period of time with insufficient air pressure to carry the load. This insufficient air pressure condition is evidenced by the deformation throughout the tire bead area. The tire failure did not result from a defect in either materials or workmanship.

While we regret that you have had this difficulty we must respectfully deny your request for compensation. You may consider turning this incident over to your vehicle insurance provider for their consideration and possible compensation.

If you would like your tire returned, please mail the attached tire return letter to Bridgestone/Firestone, Inc. within twenty-one (21) days from the date of this letter. If we have not heard from you within the twenty-one (21) day period, we will dispose of the tire.

Very truly yours,

[REDACTED]

Attachment

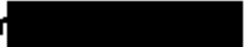
(6)




Re: Tire Inspection - (FR 680, P185/65R14 - DOT No.406JDN079)

Date: 08/21/2003

REF:624858

Dear 

We are in receipt of your letter dated 8/6/2003, but there seems to be some problems.

Firstly, the REF#  on your reply to us is not our number. See attachments

Secondly, we sent our tire, Via UPS to you on 8/4/2003 with an expected delivery of 2 business days, which should be 8/6/2003. Your initial letter to me says testing within 30 days. See attachments

How do you receive, test, and reply in one day?

Thirdly, we want our tire returned to us after testing.

Can we get a copy of the type of test and its findings from you?

We do not think that these test results are for our tire.

We are seriously considering legal action because of your negligence.

Very truly yours, 


Attachments for your records
cc: To GEICO

(7)

REF. No. [REDACTED]

Bridgestone/Firestone North American Tire, LLC
1102 Appleton Drive
Nashville, TN 37210
Attention: Legal Department

Re: Tire Return

Dear Sirs:

Please return my tire.(FR680, P185/65R14
DOT No.H406JDN079) referred to in your letter dated, 8/8/2003.

I am requesting the tire be shipped freight collect to the address shown below,
and agree to pay the shipping cost upon arrival:
(Please state a street address; we cannot ship to P.O. Boxes)

Name: [REDACTED]
Address: [REDACTED]
Silver Spring, MD [REDACTED]

OR (if address is different than above)

Name: [REDACTED]
Address: [REDACTED]
City: SILVER SPRING State: MD Zip: [REDACTED]
Signature: [REDACTED] Date: 8/21/03

On or after 8/27/2003 your tire will be scrapped.

[Redacted]

Silver Spring Md [Redacted]

Re: Status of Firestone tire damage investigation

VIN # JM1BJ222XX0150456

Dear Chris Thurston:

Date: 9/8/2003

We received the results from BFNT LLC (See attached letter dated 8/6/03 and our response dated 8/21/03)

I faxed our response and sent by registered mail also. I also spoke with Ms. Davis about BFNT LLC's findings.

She said that there was no report, the letter is the report and they conducted a non scientific examination on the tire. Please advise.

We have not received reimbursement from Geico for the replacement of the security system that was ruined by Hill & Sanders.

Hill & Sanders's practices should be reviewed before you send you clients to them to do body work. You should look at their "d'onts - board" on display in their body shop offices on Veins Mill Rd - Wheaton.

Copies of BFNT LLC's report is going to DOT.

[Redacted]



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

400 Seventh Street, S.W.
Washington, D.C. 20590

Dear Consumer:

As a result of your recent report to the DOT Auto Safety Hotline (DOT Hotline), we have recorded that report on the enclosed Vehicle Owner's Questionnaire (VOQ) form. Please review the form and make changes, additions and corrections as necessary. Additionally, please provide a more detailed description of the failure(s) you reported that you believe is(are) relevant to safety. Also, if available, include copies of repair invoices, letters to the manufacturer, or any other document related to the problem(s) you reported. If a crash or fire occurred, include a copy of the police or fire department report.

It is helpful to be as thorough as possible in your report so that our ability to use your report will be maximized. If you do not have the information, it is not necessary to complete all the boxes. However, it is very difficult to identify the scope of a vehicle problem unless the vehicle identification number (VIN) is known. The VIN is located inside the vehicle on the dashboard adjacent to the left (driver's side) of the windshield pillar. When reporting a tire problem, the brand name, tire name and complete tire size should be included. If possible also provide the DOT tire identification number. It is usually located near the rim flange of the tire on either side of the tire.

The Privacy Act prohibits our agency from identifying you to the manufacturer without your permission. If you wish to give us that permission, please mark the appropriate authorization box and sign the form to allow us to provide your name to the manufacturer. The information you provide may assist the manufacturer and NHTSA in determining if a safety-related defect exists.

Any information provided is entirely voluntary. There is no consequence or penalty of any kind if you do not wish to provide it. We seek this information to develop both statistical and investigative evidence that will help identify potential safety related problems in vehicle or vehicle equipment, e.g., tires, child safety seats, jacks, etc.

When completed, please fold and staple or tape the form so that the pre-address portion of the form is on the out side. If a larger envelope is used, tape the VOQ form to the larger envelope so that the pre-address portion of the form is showing.

If further assistance is needed, please contact Mr. Michael J. Jordan, Safety Defects Program Assistant, Correspondence Research Division, Office of Defects Investigation, at (202) 493-0576.

Thank you for your cooperation.

Sincerely,

Alberto A. Jimenez, Chief
Correspondence Research Division
Office of Defects Investigation
Enforcement

Enclosures: VOQ
DOT Hotline Pamphlet



DOT AUTO SAFETY HOTLINE
888-DASH-2-DOT
888-327-4238

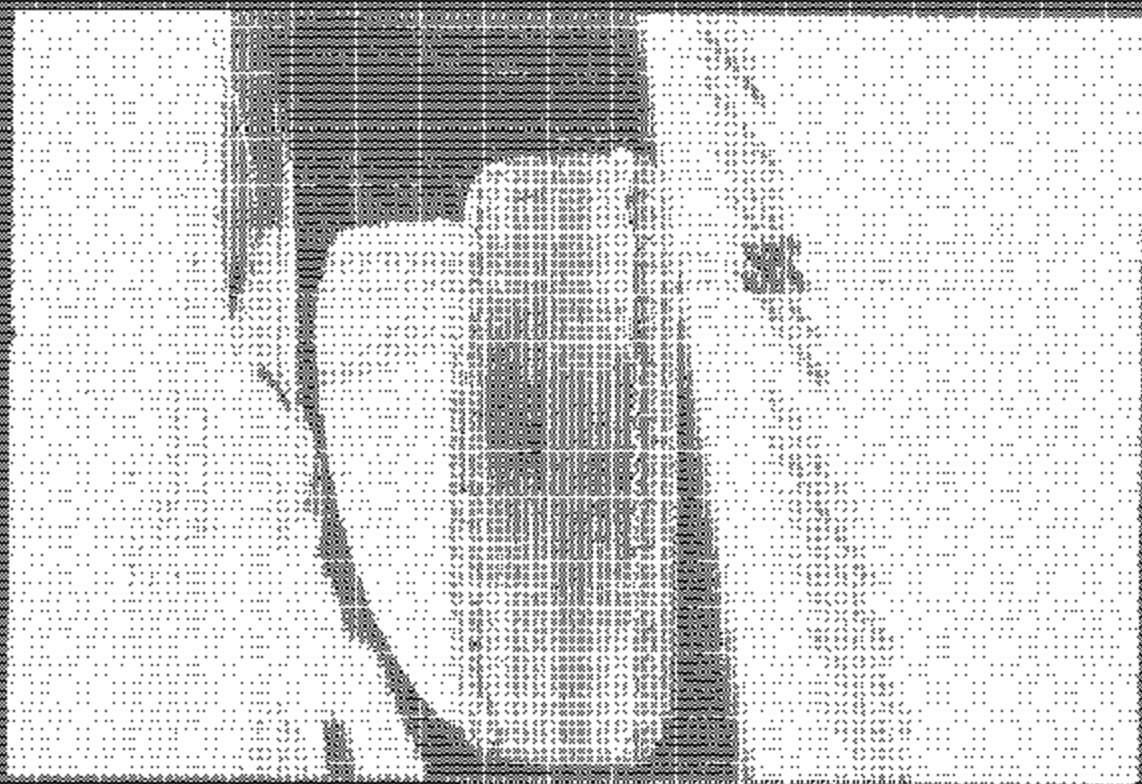
11-2-2003

Ref # JMIBJ222X20159456 - PADMORE

Mr Jimenez,

Please find copies of correspondence between us and BFNT, LLC, GEICO, BFNT LLC/LEGAL.

- (1) BFNT, LLC's procedure form with ref # 824856
 - (2) Completed incident report
 - (3) Geico's estimate of tire damage
 - (4) Tire inspection report from BFNT, LLC ref # 910881
 - (5) Copy of UPS shipping receipt.
 - (6) Reply to BFNT, LLC's Legal Dept, Ms Davis
 - (7) Tire return form (We have gotten it back)
 - (8) Copy of letter to GEICO/Mr Thurston
 - (9) Two photos of damaged tire.
- As of the above date we have not heard anything from GEICO's investigation



**THE ATTACHMENTS TO THIS
DOCUMENT HAVE BEEN REMOVED
TO PROTECT UNWARRANTED
INVASION OF PERSONAL PRIVACY
PURSUANT TO EXEMPTION 6 OF
THE FREEDOM OF INFORMATION
ACT (FOIA), 5 U.S.C. 552(b)(6).**