


 US 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

Date Received

2004 OCT -8 AM 8:38

 Od_or _____
 r_or _____
 od_r _____
 up_lr _____

Reference No.

10095489

OWNER INFORMATION (Type or Print)

 Name _____
 Street _____ Apt. No. HOUSE
 City SURPRISE State ARIZONA Zip Code _____

Daytime 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 09/08/2004
PRODUCT INFORMATION

Vehicle Identification No. (VIN) (17 Digits) <u>1N6DD26S0YC</u>		Make <u>NISSAN</u>	Model <u>FRONTIER</u>	Year <u>2000</u>
Purchased Date <u>04/22/01</u>	Dealer's Name <u>MIDWAY NISSAN</u>		Engine Size (CID/CC/L) <u>4</u>	<input type="checkbox"/> Turbo <input type="checkbox"/> Diesel <input checked="" type="checkbox"/> Gas <input type="checkbox"/> Fuel Injection
<input type="checkbox"/> New <input checked="" type="checkbox"/> Used	Dealer's City <u>PHOENIX</u>	State <u>ARIZONA</u>	Zip Code <u>85023</u>	No. Cylinders <u>4</u>
Manufacture Date (on driver's door or pillar) <u>03-2000</u>	Transmission Type <input type="checkbox"/> Manual <input checked="" type="checkbox"/> Automatic	Restraint System <input checked="" type="checkbox"/> Driver-side Air Bag <input type="checkbox"/> Motorbelt <input checked="" type="checkbox"/> Passenger-side Air Bag <input type="checkbox"/> 2-Point Belt <input checked="" type="checkbox"/> 3-Point Belt	Cruise Control <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Drivetrain <input checked="" type="checkbox"/> Front <input type="checkbox"/> Rear <input type="checkbox"/> 4-Wheel
Vehicle Type <input type="checkbox"/> Car <input type="checkbox"/> Van <input type="checkbox"/> Minivan <input type="checkbox"/> Other _____		Body Style <input checked="" type="checkbox"/> 2-door <input type="checkbox"/> 4-Door <input type="checkbox"/> Stationwagon <input checked="" type="checkbox"/> Pick Up Truck <input type="checkbox"/> Other _____		

FAILED COMPONENT(S)/PART(S) INFORMATION

Part Name(s) <u>TIRE</u>	Location <input type="checkbox"/> Left <input checked="" type="checkbox"/> Front <input type="checkbox"/> Right <input type="checkbox"/> Rear	Failed Part(s) <input checked="" type="checkbox"/> Original <input type="checkbox"/> Replacement	Handicap Adaptive Equip <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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TO BE COMPLETED WHEN REPORTING A TIRE FAILURE

Tire Brand <u>FIRESTONE</u>	Tire Name <u>WILDERNESS</u>
Complete Tire Size <u>P215/65R15</u>	DOT No. <u>W2VFENNA100</u>
No. of Failures <u>1</u>	Date(s) of Failure(s) <u>TUESDAY AUGUST 10, 2004 AT ABOUT 2:PM</u>
Mileage at Failure(s) <u>37,820 MILES</u>	Vehicle Speed at Failure(s): <u>55 MILES</u>
Failed Part(s) Available? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	NHTSA Previously Contacted? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

APPLICABLE INCIDENT INFORMATION

(Please describe in detail the incident(s), failure(s), crash(es), and injury(ies). Attach photos if available.)

Crash <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Fire <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Number of Persons Injured <u>NONE</u>	Number of Fatalities <u>NONE</u>	Reported to Manufacturer <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
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 Narrative Description of Incident(s), Failure(s), Crash(es), and Injury(ies). On Tuesday Aug 10th 2004 Approximately 2:00pm in the ARIZONA I was traveling South on I-17 South of Payson. When suddenly I heard a horrible sound coming from the front of the Pick-up and slow down to avoid running over the side of the road. I came to a slow stop to determine what happened. My front passenger tire had blown out. I had extensive damage to the wheel well + side passenger. I was not injure.

Continue on back.

The Privacy Act of 1974 - Public Law 93-579 This information is requested pursuant to a 49 U.S.C. Chapter 301. You are under no obligation to respond to this questionnaire. Your response may be used to assist NHTSA in determining whether a manufacturer should take appropriate action to correct a safety defect. If NHTSA proceeds with administration enforcement or litigation against a manufacturer, your response, or a statistical summary thereof, may be used in support of the agency's action.

Mail postage free or fax to 202-366-7862

BFNT LLC

1102 Appleton
Nashville, Tennessee 37210

REF. No. 914459

8/30/2004

[REDACTED]
Surprise, AZ [REDACTED]

Dear [REDACTED]

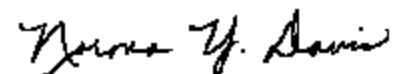
Our office has received your tire (WILDERNESS HT, P215/65R15 DOT No.W2VFNNA100)and it has been inspected by our Technical Services Manager.

We have carefully inspected your tire. Our inspection showed deformation and rim flange grooving. We did observe signs that the tire has been operated for an unknown period of time while being in an over-deflected state causing the detachment you experienced. A tire can be thought of as an air chamber designed to carry a given load. If the tire has insufficient air pressure to carry the load (over-deflected caused by overloaded or under-inflated) it will flex beyond its original design parameters. We refer to this condition as over deflection or bending, meaning the tire was flexing or bending "over and beyond" its design parameters. If this flexing continues over an extended period of time, then as the tire rolls and is pressed against the pavement by the weight of the vehicle this over-deflection causes increased friction and it will generate more heat than it was designed to endure, and it will permanently damage the tire components exposing them to the possibility that the tire will literally come apart. A key indicator that a tire has been run over-deflected is rim flange grooving in the bead area. As the sidewall is pushed out and deflected, as a result of over-flexing, the lower sidewall of the tire is pressed onto the rim flange. A groove is worn into the area on the tire near the rim flange; and this grooving is often noted by the indentations of the wheel weights.

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 reserve the right to dispose of the tire.

Very truly yours,



Norma Y. Davis
Paralegal

Attachment