



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 **2007 NOV 27 AM 8:28**
01-NOV-2007
Repository
Reference No. 10207619

OWNER INFORMATION (Type or Print)

Name [REDACTED]
Address [REDACTED]
City **BOYNTON BEACH** State **FL** Zip Code [REDACTED]
Daytime Telephone Number [REDACTED] E-mail Address **N/A**
Evening Telephone Number [REDACTED]
Do you authorize NHTSA to provide a copy of this report to the manufacturer of your vehicle?
In the absence of an authorized signature or address to the vehicle manufacturer. YES NO
Signature of Owner [REDACTED] Date **11/6/07**

VEHICLE INFORMATION

17 digit Vehicle Identification Number Located at bottom of windshield on driver's side
JNKC64E78[REDACTED] Make **INFINITI** Model **G37** Model Year **2008**
Date Purchased **24-AUG-07** Dealer's Name and Telephone Number **INFINIT OF DAVIE 954-734-2500** Engine: **6** Fuel Type: **Gas**
Original Owner Dealer's City **DAVIE** State **FL** Zip Code **33330**
Transmission Type **AUTOMATIC** Antilock Brakes Cruise Control Powertrain **REAR WHEEL DRIVE** Vehicle Component Code **192000 TIRES:SIDEWALL**
Multiple Failure: **1**

FAILED COMPONENT(S)/PART(S) INFORMATION

Incident Date(s) **09-OCT-2007** Failure Mileage **1370** Failure Speed **65**

ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A TIRE FAILURE

Tire Make **BRIDGESTONE** Tire Model (Name or Number) **POLE POSITION - POTENZA-RE-OSO A** Tire Size (Example P215/65R15) **24540W19**
DOT No. (Example: DOTM9ABC036) **EJ8T JHJ2307** Original Equipment Prior Repair Failure Location: **DRIVER SIDE REAR**
Tire Component Code **192000 TIRES:SIDEWALL** Tire Failure Type **FLAT**

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).

TL*THE CONTACT OWNS A 2008 INFINITI G37. THE VEHICLE HAS BRIDGESTONE POLE POSITION, SIZE 24540W19 TIRES. WHILE DRIVING 65 MPH, THE CONTACT STATED THAT THERE WAS A FLAT ON THE DRIVER SIDE REAR TIRE. THE DEALER STATED THAT THERE WERE ABNORMAL TEARS ON THE SIDEWALL OF THE REAR DRIVER SIDE TIRE CAUSED BY A TIRE IMPERFECTION. THE DEALER REPLACED THE TIRE. THE FAILURE MILEAGE WAS 1,370 AND CURRENT MILEAGE WAS 2,145. - POTENZA-RE-OSO A
THE FAILURE WAS NOT CAUSED BY NAILS, SPURS, TRAPS ETC SINCE NONE WERE FOUND IN TIRE.

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 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.

Narrative Description of Incident(s), Failure(s), Crash(es), and Injury(ies)

I DO NOT KNOW WHAT CAUSED
MY TIRE TO FAIL. IT WOULD
NOT HOLD ANY AIR AFTER IT
WENT FLAT. IF THERE IS A
DEFECT, I AM CONCERNED
ABOUT THE SAFETY OF THE OTHER
THREE BRIDGESTONE TIRES ON
MY CAR.

ATTACH ADDITIONAL SHEETS IF NECESSARY

U.S. Department
of Transportation

**National Highway
Traffic Safety
Administration**

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

Official Business
Penalty for Private Use \$300



NO POSTAGE
NECESSARY
IF MAILED
IN THE
UNITED STATES

BUSINESS REPLY MAIL

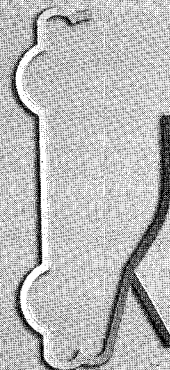
FIRST CLASS PERMIT NO 73173 WASHINGTON, D.C.

POSTAGE WILL BE PAID BY NATL. HWY. TRAFFIC SAFETY ADMIN.

U.S. Department of Transportation
National Highway Traffic Safety Administration
Office of Defects Investigation, NVS-210
400 7th Street, SW
Washington, DC 20590



**Think your vehicle
has a safety defect?**



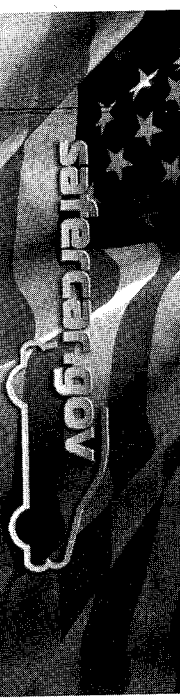
**If so:
Use the enclosed
form to file a report.**

**or visit:
www.safercar.gov**

**or call:
Vehicle Safety Hotline
888-327-4236**

nhtsa
www.nhtsa.dot.gov
people saving people

Vehicle Owner's Questionnaire (VOQ)
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THE ATTACHMENTS TO THIS
DOCUMENT HAVE BEEN REMOVED
TO PROTECT UNWARRANTED
INVASION OF PERSONAL PRIVACY
PURSUANT TO EXAMPTION 6 OF
THE FREEDOM OF INFORMATION
ACT (FOIA), 5 U.S.C. 552(b)(6).