



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

DOT Auto Safety Hotline
Vehicle Owner's Questionnaire
To Report Vehicle Safety Defects
2008 DEC 1 11:58 AM DOT
(1-888-327-4236)
INTERNET: www.nhtsa.dot.gov/hotline

FOR AGENCY USE ONLY 100148

Date Received: 31-OCT-2008
Repository:
Reference No.: 10247335

OWNER INFORMATION (Type or Print)

Name: _____
Address: _____
City: PAW PAW State: WV 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?
In the absence of a Signature of Owner _____ r name or address to the vehicle manufacturer. YES NO
Date: 11/21/08

VEHICLE INFORMATION

17 digit Vehicle Identification Number Located at bottom of windshield on driver's side: 1G2WR1214XP
Make: PONTIAC Model: GRAND PRIX Model Year: 1999
Date Purchased: 6-07 Dealer's Name and Telephone Number: ~~Russell~~ E-Bay Engine: 3800 Fuel Type: Premium
Original Owner: Dealer's City: _____ State: _____ Zip Code: _____ No. of Cylinders: 6
Transmission Type: Antilock Brakes Powertrain: Automatic Multiple Failure(s): _____ Incident Date(s): 29-OCT-2008
 Cruise Control

FAILED COMPONENT(S)/PART(S) INFORMATION

Vehicle Component Code: 060000 ENGINE AND ENGINE COOLING Failure Mileage: 145000 Failure Speed: 0
143,435

ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A TIRE FAILURE

Tire Make: Michelin Tire Model (Name or Number): Hydro edge Tire Size (Example P215/65R15): _____
DOT No. (Example: DOTM19ABC036) Original Equipment Prior Repair Failure Location: Top of engine
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: Y

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 1999 PONTIAC GRAND PRIX. THE CONTACT PARKED THE VEHICLE AND LEFT. WHEN HE RETURNED, THE VEHICLE WAS ON FIRE. THERE WERE NO INJURIES. THE FIRE DEPARTMENT EXTINGUISHED THE FIRE AND A REPORT WAS FILED. THE VEHICLE WAS ABLE TO BE DRIVEN TO THE CONTACT'S RESIDENCE. THE VEHICLE IS CURRENTLY PARKED AND HAS NOT BEEN DRIVEN SINCE THE INCIDENT. THE DEALER AND MANUFACTURER HAVE NOT BEEN NOTIFIED. THE FAILURE HAS NOT BEEN DIAGNOSED AND THE VEHICLE HAS NOT BEEN REPAIRED. THE CURRENT MILEAGE WAS 145,045 AND FAILURE MILEAGE WAS 145,000.

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.

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

pulled in front of Romney court House, and noticed smoke coming out from under hood. So I got out of the car and popped the hood. When I did flames started shooting up from the top of the motor. Luckily there was a man that ran out of the court house with a fire extinguisher, and put out the fire before the fuel rails exploded. The fire was out before the fire department showed up. A mechanic told me it might make it home (I was parked in front of a meter and didn't have money for a tow truck) so I drove it home. As soon as I hit my driveway, the throttle stuck open, and I almost ran into my house. Needless ^{to say} I haven't drove it since. I tried started it to see if the throttle had come unstuck, but it was.

ATTACH ADDITIONAL SHEETS IF NECESSARY

US Department of Transportation

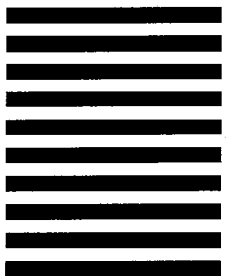
National Highway Traffic Safety Administration

1200 New Jersey Avenue SE. Washington, D.C. 20077-9382

Official Business Penalty for Private Use \$300



NO POSTAGE NECESSARY IF MAILED IN THE UNITED STATES



BUSINESS REPLY MAIL
FIRST-CLASS MAIL PERMIT NO. 1888 WASHINGTON, DC

POSTAGE WILL BE PAID BY ADDRESSEE

**US Department of Transportation
National Highway Traffic Safety Administration
Office of Defects Investigation, NVS-210
1200 New Jersey Avenue SE.
Washington, D.C. 20077-9382**



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**



Vehicle Owners' Questionnaire (VOQ)
U.S. Department of Transportation
National Highway Traffic Safety Administration

14105 FDID	WV State	10/29/2008 Incident Date	Station	Incident Number	0 Exposure	NFIRS - 1 Basic
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Location	<input type="checkbox"/> Address is on the Wildland Fire Module	Census Tract:
Street Address	HIGH ST.	
Number/Milepost	Prefix Street or Highway	Street Type
Apt./Suite/Room	Romney City	WV State
		26757 Zip Code
Cross street or directions		

Incident Type 131 Passenger vehicle fire	Dates & Times
Shifts & Alarms	Alarm: 10/29/2008 3:24:00PM
	Arrival: 10/29/2008 3:29:00PM
	Controlled:
Shift Alarm District	Last Unit: 10/29/2008 3:41:00PM

Actions Taken	Resources
86 Investigate	<input checked="" type="checkbox"/> Apparatus or Personnel Form Used
Primary Action Taken (1)	Suppression: 1 Apparatus 4 Personnel
Additional Action Taken (2)	EMS: 0 0
Additional Action Taken (3)	Other: 0 0
	<input type="checkbox"/> Resource counts include aid received

Estimated Dollar Losses & Values			
LOSSES	None	PRE-INCIDENT VALUE:	
Property: 1,500	<input type="checkbox"/>	Property: 5,500	<input type="checkbox"/>
Contents: 0	<input checked="" type="checkbox"/>	Contents: 0	<input checked="" type="checkbox"/>

Casualties	<input checked="" type="checkbox"/> None	Hazardous Materials Released	
Deaths	Injuries		
Fire Service: 0	0		
Civilian: 0	0		

Detector	Mixed Use Property
Detector Alerted Occupants	

Property Use
962 Residential street, road or residential driveway

Person/Entity Involved

Business name

Phone Number

Mr., Ms., Mrs.

First Name

MI Last Name

Suffix

Number

Prefix

Street or Highway

Street Type

Suffix

Post Office Box

Apt./Suite/Room

City

State

Zip Code

Owner

Business name

Phone Number

Mr., Ms., Mrs.

First Name

MI Last Name

Suffix

Number

Prefix

Street or Highway

Street Type

Suffix

Post Office Box

Apt./Suite/Room

City

State

Zip Code

Authorization

Officer in charge:

WILLIAMS, GEORGE, H

Signature:

George H. Williams, Chief

INCIDENT C

10/29/2008

Assignment

Date

Member making report:

WILLIAMS, GEORGE, H

Signature:

George H. Williams, Chief

Assignment

Date

14105	WV	10/29/2008		809075	0	NFIRS - 1
FDID	State	Incident Date	Station	Incident Number	Exposure	Notes

Notes **Title:** Notes Page 1

DISPATCHED FOR A CAR FIRE ACROSS FROM NEW JUDICIAL BLDG. UPON ARRIVAL FIRE HAD BEEN EXTINGISHED WITH FIRE EX BY CIVILIANS. WE CHECKED FOR ANY EXTENSION , GOT INFO FROM DRIVER AND CLEARED.

14105	WV	10/29/2008		809075	0	NFIRS - 9
FDID	State	Incident Date	Station	Incident Number	Exposure	Apparatus

Unit ID:	1-13	Dispatched:	10/29/2008 3:24:00PM	Use:
Serial #:	1FV6TMEB9XH	Enroute:	10/29/2008 3:28:00PM	
Type:	11	Arrival:	10/29/2008 3:29:00PM	
	Engine	Clear:	10/29/2008 3:41:00PM	
		In Quarters:	10/29/2008 3:42:00PM	
Actions Taken				
1)		3)	86 Investigate	
2)		4)		

Personnel ID	Name
FOSTER, ROBERT A	BASIC FIREMAN ROBERT A FOSTER
Type Action Taken 1):	86 Investigate
Type Action Taken 2):	81 Incident command
LEE, ROBERT, M	CHIEF ENGINEER ROBERT M LEE
Type Action Taken 1):	86 Investigate
Type Action Taken 2):	81 Incident command
WILLIAMS, GEORGE, H	CHIEF GEORGE H WILLIAMS
Type Action Taken 1):	86 Investigate
Type Action Taken 2):	81 Incident command
WILLIAMS, TYLER, M	SENIOR FIREMAN TYLER M WILLIAMS
Type Action Taken 1):	86 Investigate
Type Action Taken 2):	81 Incident command

14105	WV	10/29/2008		809075	0	NFIRS - 2
FDID	State	Incident Date	Station	Incident Number	Exposure	Fire

Property Details

0 Not Residential 0.000 None
 Est. number of residential units Acres burned Less than one acre

0 Buildings not involved
 Number of buildings involved

On-Site Materials or Products None

On-site material (1) Storage use (1)
 On-site material (2) Storage use (2)
 On-site material (3) Storage use (3)

<p>Ignition</p> <p>83 Engine area, running gear, wheel area Area of origin 40 Hot or smoldering object, other Heat Source 62 Flammable liquid/gas - in/from engine or burner Item first ignited <input type="checkbox"/> Confined to object of origin 20 Flammable or combustible liquid, other Type of material first ignited</p>	<p>Cause Of Ignition <input type="checkbox"/> Exposure Report 2 Unintentional Cause</p> <hr/> <p>Factors Contributing To Ignition <input checked="" type="checkbox"/> None</p> <p>Factor contributing to ignition (1) Factor contributing to ignition (2)</p>
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<p>Human Factors Contributing To Ignition <input checked="" type="checkbox"/> None</p> <p><input type="checkbox"/> Asleep <input type="checkbox"/> Possibly impaired by alcohol or drugs <input type="checkbox"/> Unattended person <input type="checkbox"/> Possibly mentally disabled <input type="checkbox"/> Physically disabled <input type="checkbox"/> Multiple persons involved</p>	<p><input type="checkbox"/> Age was a factor</p> <p>Estimated age of person involved</p> <p>Sex of person involved</p>
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14105	WV	10/29/2008		809075	0	NFIRS - 2 Fire
FDID	State	Incident Date	Station	Incident Number	Exposure	

Equipment Involved In Ignition <input checked="" type="checkbox"/> None Equipment code Brand: Model: Serial #: Year: 0	Equipment Power Equipment Power Source Code
	Equipment Portability <input type="checkbox"/> Portable <input type="checkbox"/> Stationary

Fire Suppression Factors None

Fire suppression factor (1)

Fire suppression factor (2)

Fire suppression factor (3)

Mobile Property Involved <input type="checkbox"/> None <input type="checkbox"/> Not involved in ignition, but burned <input type="checkbox"/> Involved in ignition, but did not burn <input checked="" type="checkbox"/> Involved in ignition and burn GRAND PRIX 1999 Mobile property model Year WV 1G2WR1214X License Plate Number State VIN Number	Mobile Property Type & Make 11 Passenger car. Mobile property type PN Pontiac Mobile property make
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Local Use

Pre-Fire Plan Available

Arson report attached

Police report attached

Coroner report attached

Other reports attached