

 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 18-APR-2012 JUN 04 2012	Repository ☐ Reference No. 10455614
OWNER INFORMATION (Type or Print)			
Name [REDACTED]		Daytime Telephone Number [REDACTED]	
Address [REDACTED]		E-mail Address [REDACTED]	
City ROCHESTER	State NY	Zip Code [REDACTED]	
The information you provide will be used to identify potential safety-related defects. We may share your information with the applicable vehicle manufacturer during an investigation or recall in accordance with the routine uses described in the agency's Privacy Act notice. See 49 FR 53971 (Sep. 3, 2004).			
VEHICLE INFORMATION			
17 digit Vehicle Identification Number Located at bottom of windshield on driver's side 4T1BE46K47L [REDACTED]		Make TOYOTA	Model Year 2007
Date Purchased 4-2007	Dealer's Name and Telephone Number Hoselton Toyota		Engine: No: Cylinders
Original Owner ☒	Dealer's City E. Rochester, N.Y.	State NY	Fuel Type: Unleaded
Transmission Type Auto	☒ Antilock Brakes ☒ Cruise Control	Powertrain Unknown	Multiple Failure: N/A
		Incident Date(s) 05-APR-2012	
FAILED COMPONENT(S)/PART(S) INFORMATION			
Vehicle Component Code: 110000 ELECTRICAL SYSTEM		Failure Mileage 84000	Failure Speed 15
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: DOTM19ABC036)	☐ 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).			
TL* THE CONTACT OWNS A 2007 TOYOTA CAMRY. THE CONTACT WAS DRIVING 15 MPH WHEN FLAMES EMITTED FROM INSIDE THE DRIVER'S SIDE WINDOW PANE. THE VEHICLE WAS DESTROYED AND THE FIRE DEPARTMENT WAS CONTACTED. THE VEHICLE WAS NOT TAKEN TO THE DEALER FOR INSPECTION. THE CAUSE OF THE FIRE WAS UNKNOWN. THE MANUFACTURER WAS MADE AWARE OF THE FAILURE. THE FAILURE AND THE CURRENT MILEAGES WERE 84,000.			
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 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)

Fire started in drivers door. Please Fire report
inclosed.

ATTACH ADDITIONAL SHEETS IF NECESSARY

U.S. 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

ROCHESTER NY 144

05 MAY 2012 PM 5 L

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 Owner's Questionnaire (VCO)
U.S. Department of Transportation
National Highway Traffic Safety Administration

NFIRS-1

Basic



A Rochester Fire Department

Fire Department

04/05/2012 08:38:22 2012-007922 00

Date

Time

Incident Number

Exposure

B Street address

ROCHESTER, NY

Cross Street: RR OVERPASS

Census Tract



C Incident Type

Passenger vehicle fire

E₁ Dates and Times

Alarm Time 04/05/2012 08:38:22

Time Out 04/05/2012 08:40:18

Arrival 04/05/2012 08:42:01

Controlled

Cleared 04/05/2012 08:53:54

E₂ Shift and Alarms

3

1

Shift

Alarm

District

Alarm Box

E₃ Special Studies

D Mutual Aid: None

Their FDID State Incident

XXXXX

Responding Departments (Press Other)

F Actions Taken

1. Extinguishment by fire service personnel

G₁ Resources

Apparatus

Personnel

Suppression

EMS

Other

Personnel Not on Apparatus

Total Personnel

G₂ Estimated Dollar Losses

Losses

Property Unknown

Contents Unknown

Pre Incident Value

Property Unknown

Contents Unknown

H₁ Casualties

Deaths

Injuries

Fire Service 0 0

Civilian 0 0

H₃ Hazardous Materials Release

None

J Property Use

Vehicle parking area

H₂ Detector

I Mixed Property Use

K₁ Person Entity InvolvedK₂ Owner

ROCHESTER, NY

L Remarks

Respond for a vehicle on fire. We found a car in a parking lot with it's door on fire. We stretched a line and put it out.

M CHARLES J STEINER

Officer in Charge

Lieutenant

Rank

Unit Officer

Assignment

04/05/2012

Date

CHARLES J STEINER

Member Making Report

Lieutenant

Rank

Unit Officer

Assignment

04/05/2012

Date

NFIRS-2

Fire



B Property Details

B₁ Not Residential

Estimated number of residential living units in building of origin whether or not all units

B₂ Buildings not Involved

Number of buildings involved

B₃ None

Acres burned (outside fires)

C On-Site Materials or Products

On-site material (1)

Storage Code

On-site material (2)

Storage Code

On-site material (3)

Storage Code

D Ignition

Operator/passenger area of transportation equip.
Area of Fire Origin

Heat, spark from friction
Heat Source

Electrical wire, cable insulation
Item First Ignited

Plastic

Type of Material First Ignited

E₁ Cause of Ignition

Failure of equipment or heat source

E₂ Factors Contributing to Ignition

1. Unspecified short-circuit arc

E₃ Human Factors

None

F Equipment Involved in Ignition**G Fire Suppression Factors**

None

H₁ Mobile Property Involved

Involved in ignition and burned

Toyota

Mobile Property Make

Camery

Mobile Property Model

2007

Year

License Plate Number

NY

State

4T1DE46K47U

VIN Number

H₂ Mobile Property Type

Automobile, passenger car, ambulance, race car