


DEC 3 2 2014
INFORMATION Redacted PURSUANT TO THE FREEDOM OF

 U.S. Department of Transportation National Highway Traffic Safety Administration		INFORMATION ACT (FOIA), 5 U.S.C. 552(B)(6) DOT Auto Safety Hotline		FOR AGENCY USE ONLY 100148	
Vehicle Owner's Questionnaire To Report Vehicle Safety Defects 1-888-DASH-2-DOT (1-888-327-4236) INTERNET: www.nhtsa.dot.gov/hotline				Date Received 02-OCT-2014	
				Repository <input type="checkbox"/>	
				Reference No. 10640761	
OWNER INFORMATION (Type or Print)					
Name		Address		Daytime Telephone Number	
City		State		Evening Telephone Number	
BRADENTON		FL			
Zip Code		E-mail Address			
		NOEMAIL@UNK.GOV			
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			Make		Model
JNB8AZ1M00CW			NISSAN		MURANO
Model Year			Engine:		Fuel Type:
2012			No: Cylinders		GAS
Date Purchased		Dealer's Name and Telephone Number			
Feb 2013		Furkins Nissan 914-755 1571			
Original Owner		Dealer's City		State	
<input checked="" type="checkbox"/>		BRADENTON		FL	
Zip Code		Multiple Failure:		Incident Date(s)	
34207				30-SEP-2014	
Transmission Type		Powertrain			
<input type="checkbox"/> Antilock Brakes					
<input type="checkbox"/> Cruise Control					
FAILED COMPONENT(S)/PART(S) INFORMATION					
Vehicle Component Code: ENGINE (PWS)				Failure Mileage	
N/A				24092	
Failure Speed					
ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A TIRE FAILURE					
Tire Make		Tire Model (Name or Number)		Tire Size (Example P215/65R15)	
N/A		N/A		N/A	
DOT No. (Example: DOTM9ABC036)		<input type="checkbox"/> Original Equipment <input type="checkbox"/> Prior Repair		Failure Location:	
				N/A	
Tire Component Code				Tire Failure Type:	
				N/A	
ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A CHILD SEAT FAILURE					
Make:		Date Manufactured:		Model No./Name:	
		2012			
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		Fire		Number of Persons Injured	
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		0	
				Number of Deaths	
				0	
				Reported to Police	
				N YES	
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 OWNED A 2012 NISSAN MURANO. WHILE THE VEHICLE WAS PARKED, THE CONTACT WAS INFORMED THAT THE VEHICLE WAS ON FIRE. THE FIRE DEPARTMENT EXTINGUISHED THE FIRE. A POLICE OR FIRE REPORT WAS NOT FILED. THE VEHICLE WAS DESTROYED AND TOWED TO AN IMPOUND LOT. THE MANUFACTURER WAS MADE AWARE OF THE FAILURE. THE VIN WAS UNAVAILABLE. THE FAILURE MILEAGE WAS 24,092.					
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)

I do have Fire Department Report which says
fire came from engine which caught on fire
entire car. Incident happen my business parking lot
[redacted] Colonial Hts, VA [redacted]
Chesterfield Fire Marshall Department Has Report VA

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

RICHMOND VA 230

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 (VOQ)
U.S. Department of Transportation
National Highway Traffic Safety Administration

safercar.gov