

INFORMATION Redacted PURSUANT TO THE FREEDOM OF
INFORMATION ACT (FOIA), 5 U.S.C. 552(B)(6)

 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 APR 00 2016 21-DEC-2015		Repository ☐ Reference No. 10811514	
OWNER INFORMATION (Type or Print)					
Name		Address		Daytime Telephone Number	
City		State		Evening Telephone Number	
SPANAWAY		WA			
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	
2G4WB55K1Y1		BUICK		REGAL	
Date Purchased		Dealer's Name and Telephone Number		Engine:	
12-2006		INDIVIDUAL		No: Cylinders	
Original Owner		Dealer's City		6	
		State		Fuel Type:	
		Zip Code		Reg	
Transmission Type		Powertrain		Incident Date(s)	
☒ Antilock Brakes				20 JUN 2015	
☒ Cruise Control				15 JUL 2015	
				20 JUN 2015	
FAILED COMPONENT(S)/PART(S) INFORMATION					
Vehicle Component Code: ENGINE (PWS)				Failure Mileage	
				200000	
				Failure Speed	
				PARKED	
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	
				None	
				Number of Deaths	
				None	
				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 OWNED A 2000 BUICK REGAL. WHILE PARKED, THE VEHICLE CAUGHT FIRE. THE FIRE DEPARTMENT WAS ABLE TO EXTINGUISH THE FIRE. A POLICE REPORT WAS NOT FILED. THE VEHICLE WAS DESTROYED. THE VEHICLE WAS INCLUDED IN NHTSA CAMPAIGN NUMBER: 15V701000 (ENGINE AND ENGINE COOLING). THE MANUFACTURER WAS NOTIFIED OF THE FAILURE. THE APPROXIMATE FAILURE MILEAGE WAS 200,000.					
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)

ON JUNE 20, 2015 I DROVE MY 2000 BUICK REGAL TO MY FRIEND [REDACTED] AT [REDACTED] GRAFTON, WA [REDACTED] FOR A VISIT. MY CAR RAN FINE AND WHEN I PARKED AT [REDACTED] THERE WAS NO SMOKE OR FIRE INDICATIONS. WE WERE HAVING COFFEE WHEN A NEIGHBOR CAME TO HIS DOOR AND SAID MY CAR WAS ON FIRE. THIS WAS 5 MINUTES OR LESS SINCE I GOT THERE. WE CALLED THE FIRE DEPARTMENT AND THEY PUT THE FIRE OUT AS STATED ON THE INCLOSED REPORT. THE CAR WAS DESTROYED FROM THE FIRE SO I HAD IT TOWED TO A JUNK YARD. I HAD A TUNE-UP DONE TO IT A MONTH EARLIER SO I INCLUDED THE RECEIPT FOR THIS.

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

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US Department of Transportation

National Highway Traffic Safety Administration

Office of Defects Investigation, NVS-210 DEF-100

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

6-21-15





6/21/15

COPY

Incident Report

Basic

Alarm Date and Time	11:17:53	Saturday, June 20, 2015
Arrival Time	11:25:18	
Controlled Date and Time		
Last Unit Cleared Date and Time	12:00:31	Saturday, June 20, 2015
Response Time	0:07:25	
Priority Response	Yes	
Completed	Yes	
Reviewed	Yes	
Fire Department Station	96	
Shift	C	
Incident Type	131 - Passenger vehicle fire	
Aid Given or Received	N - None	
Alarms	1	
Action Taken 1	11 - Extinguish	
Casualties	No	
Apparatus - Suppression	1	
Apparatus - Other	1	
Personnel - Suppression Personnel	2	
Personnel - Other	1	
Property Loss	\$0.00	
Contents Loss	\$0.00	
Property Value	\$0.00	
Contents Value	\$0.00	
Property Use	965 - Vehicle parking area	
Location Type	Address	
Address		
City, State Zip	Graham, WA	
District	21	
Census Tract	0	
Directions	21-965	
Latitude	47.027485	
Longitude	-122.295697	
Map Page	919	

Situation

Initial Dispatch Code VEH2

Person Involved/Property Owner - Iverson, Odell

Owner	Yes
Last Name	
First Name	
Street Address	
City, State Zip	Spanaway, WA

Fire

Area of Origin UU - Undetermined

Graham Fire & Rescue
23014 70TH AVE E
PO Box 369
Graham, WA 98338
253 847 8811
Istahnke@grahamfire.org
Printed: 01/27/2016 08:40:01
Number of Pages: 3

Incident Report

Authority	
Reported By	0032 - Budd, Brian W 22:38:29 Saturday, June 20, 2015
Officer In Charge	0023 - Henson, David K 22:38:42 Saturday, June 20, 2015
Reviewer	0129 - Kachman, Michael S 23:19:24 Saturday, June 20, 2015

Narratives	
Narrative Name	New Narrative
Narrative Type	Incident
Narrative Date	22:34:17 Saturday, June 20, 2015
Author	0032 - Budd, Brian W
Author Rank	FF
Author Assignment	1
Narrative Text	E96 and B94 responded to a report of a car fire. E96 arrived to find a car with fire from the engine compartment, parked in front of a business. E96 extinguished the fire with a 1 3/4 hose line and 100 gal. of water. B94 arrived and took Meridian command.

End of Report