



U.S. Department
of Transportation

National Highway
Traffic Safety
Administration

INFORMATION ACT (FOIA)

Vehicle Owner's Questionnaire
To Report Vehicle Safety Defects
1-888-DASH-2-DOT
(1-888-327-4236)
INTERNET: www.nhtsa.dot.gov/hotline

5 U.S.C. 552(b)(6) 100148

Date Received

Repository ☐

06-JUL-2016

Reference No.
10882877

SEP 21 2013

SEP 21 2013

Daytime Telephone Number

E-mail Address

Evening Telephone Number

NAME INFORMATION (Type or Print)

Name

Address

City

PHILADELPHIA

State PA

Zip Code

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
SCION

Model
TC

Model Year
2007

Date Purchased
9/2007

Dealer's Name and Telephone Number
Max Paul Ardmore Toyota

Engine:
No: Cylinders

Fuel Type:
Gasoline

Original Owner
☒

Dealer's City
Ardmore

State
PA

Zip Code

Transmission Type

☒ Antilock Brakes

Powertrain

Multiple Failure:

Incident Date(s)
03-JUL-2016

FAILED COMPONENT(S)/PART(S) INFORMATION

Vehicle Component Code: 110000 ELECTRICAL SYSTEM

but not positive

Failure Mileage
117000

Failure Speed
25

Progressive Insurance said might have been gas line but not sure

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

Number of Deaths

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 OWNED A 2007 SCION TC. WHILE DRIVING APPROXIMATELY 25 MPH, THE DRIVER OBSERVED FLAMES COMING FROM THE FRONT PASSENGER SIDE FLOORBOARD. THE DRIVER PULLED OVER AND EXITED THE VEHICLE. THE FIRE DEPARTMENT EXTINGUISHED THE FIRE. THERE WERE NO INJURIES REPORTED. A FIRE AND A POLICE REPORT WERE FILED. THE VEHICLE WAS DESTROYED AND TOWED TO A JUNK YARD. THE MANUFACTURER WAS NOT MADE AWARE OF THE FAILURE. THE FAILURE MILEAGE WAS APPROXIMATELY 117,000. THE VIN WAS UNAVAILABLE. The VIN IS: JTKDE17777

Toyota (the manufacturer) was contacted by phone & said they would call back w/in 10 days but never did. They were told where the car was (Florida's junk yard) & I called when Progressive found it to be a auction salvage yard but never heard back from them. Please see attached additional narrative

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.

Additional Narrative (Detailed)

On July 3, 2016 I, [REDACTED] got into my car (2007 Toyota Scion TC) to go to work at Costco in Mt Laurel, NJ. I turned the a/c knob on but noticed no air was coming out. I went to the gas station to get gas out & left. As I pulled out, I noticed that the a/c was coming in & out. I was on [REDACTED] when I noticed a mist like coming out of vents. I pulled over, looked down & saw flames coming out of passenger side carpet. I exited the car & a man pulled up behind me & called 911. The car was filling up w/ smoke & flames & I got as far away from it as possible. The fire dept came & extinguished fire. I called my insurance co to give a statement then called Toyota to file a report. The car was towed by Camden police to Hanigersons tow yard in Pennsauken, NJ. ~~I~~ I emailed pictures (see enclosed to Toyota) & got a case # from them. # [REDACTED] I was told they would send a claim rep out to inspect the car & that they would call me w/in 10 days but they never did. Progressive towed car to a salvage auction yard in Turnersville, NJ. I reported this to Toyota but again never heard back from them. Enclosed please find pictures, the police report (which was wrong) & the fire report. Please call if you have any further questions.

[REDACTED]

ON ARRIVAL CREWS ENCOUNTERED A MIDSIZE VASS VEHICLE
FULLY INVOLVED. CREWS USED 2 $1\frac{3}{4}$ " HAND LINES &
A BOOSTER LINE ^{CO₂ EXT.} TO EXTINGUISH THE VEHICLE FIRE
PLAT 5 WAS CALLED TO EVALUATE THE LEAKING FUEL FROM
THE VEHICLE. IT WAS DETERMINED THAT THE LEAKING FUEL
WAS UNRECOVERABLE THE VEHICLE WAS TOWED BY CHUBB.

VEHICLE OWNER -

PHILA PA APT.

REN # [REDACTED] OFFENSE/INCIDENT REPORT

REPORT DATE / TIME Jul 3, 2016 10:14	DISTRICT / SECTOR / GRID District 2 / Sector 206 / Grid 170	EVENT START DATE / TIME - EVENT END DATE / TIME Jul 3, 2016 10:15 - Jul 3, 2016 10:15
PRIMARY REPORTER Matthew Wilson #164		WEATHER Mild Temperature
ASSISTING PERSONNEL / TYPE(S)		

REPORT TAKEN LOCATION [REDACTED] NJ [REDACTED] UNITED STATES		
SHOOTING ☐ YES ☒ NO	EMS / FIRE / OTHER LE AGENCIES ON SCENE ☒ YES ☐ NO	UNIT Audobon Park FD

STAT REPORTING		
☐ Juvenile Related	☐ Street Crime	☐ Gang Related
☐ Domestic Violence Offense	☐ Shooting Incident	☐ Shooting Hit
☐ Retaliatory Violence	☐ Police Officer Injured	☐ Terry Frisk
☐ Consent Search	☐ Warrantless Search	☐ Contraband Seized
☐ Use of Force	☐ Administered Narcan	☐ School Based Incident

NOTIFICATIONS

NOTIFICATION-1 MADE On Duty Detective	NOTIFICATION DATE Jul 3, 2016 10:16
NOTIFICATION DETAILS Det. Henderson	

NARRATIVE

On July 3, 2016, Officer Loberto and I were dispatched by communications to [REDACTED] and [REDACTED] for a vehicle fire. Once on scene we observed a 2007 Scion bearing Pennsylvania registration ([REDACTED]) fully engulfed in flames. Audobon Park Fire Department arrived on scene and put the vehicle fire out. The registered owner of the vehicle was identified as [REDACTED] of Philadelphia, Pennsylvania. [REDACTED] was not hurt and refused medical treatment at this time. [REDACTED] advised that she was having problems with her air condition unit in the vehicle and pulled over on [REDACTED] Northbound just before [REDACTED] then stated her hood began to engulf in flames. Communications Operator #9810 was advised to dispatch Flanagan's Towing to my locations to remove the vehicle from the scene. [REDACTED] was given a case number in reference to this incident and transported by Officer Berry to an unknown location in Gloucester City, New Jersey. Flanagan's Towing arrived on location, removed the vehicle from the scene, and transported the vehicle to their impound lot in Pennsauken, New Jersey. [REDACTED] Northbound was reopened and all units cleared from the scene without further action taken.

REPORTING PARTY

REPORTING PARTY-1 (PERSON) R-1 Wilson #164, Officer		DOB / ESTIMATED AGE RANGE Unknown	
SEX Male	RACE / ETHNICITY	PHONE	EMAIL
HOME ADDRESS			BEEN AT LOCATION SINCE

INCIDENT INFO

INCIDENT TYPE Suspicious Fire
INCIDENT STATISTICS

REPORTING OFFICER SIGNATURE / DATE Matthew Wilson #164 Jul 3, 2016 10:45(e-signature)	SUPERVISOR SIGNATURE / DATE Maria Velez #9855 Jul 4, 2016 10:06(e-signature)
PRINT NAME Matthew Wilson #164	PRINT NAME Maria Velez #9855

WEST COLLINGSWOOD HEIGHTS FIRE COMPANY
FIRE & DRILL REPORT

Run # 101 County # 160255030 Date: 7/3/16 Time: 1 Hrs. 5 Min. Day Night
Dispatch 9:23 Responding 9:24 On Location 9:30 U/C _____ Available 10:20

Type of Call: VEHICLE

Description of Property: SMALL VEHICLES

Owner's Name: _____

Owner's Address: _____

Incident Location: _____

Cause of Fire, Emergency, Etc. _____

Equipment Used: 4in. Hose _____ 1 3/4 hose ☒ 2-1/2 hose _____

None: _____ Booster Line ☒ Air-Paks ☒ Spare bottles _____

Other: _____ Generators _____ Smoke Ejectors _____ Hand lights _____

Saws: Quick-Vent _____ K-12 _____ Chain Saw _____

Brooms ☒ Shovels ☒ Oil Dry ☒ Pads ☒ DIGS

CO₂ EXTINGUISHER

Equipment Damaged or Inoperative: Yes ☒ No Describe _____

Firefighter Injuries: Yes ☒ No Describe _____

Civilian Injuries: Yes ☒ No Describe _____

Apparatus Responding: 1521 _____ 1522 ☒ 1526 _____ 1577 ☒ 1529 ☒

Mutual-Aid Received By: _____

Officer in Charge #: JELONER Report prepared by: MILLEN

Attendance:

- 13) _____
- 14) _____
- 15) _____
- 16) _____
- 17) _____
- 18) _____
- 19) _____
- 20) _____
- 21) _____
- 22) _____
- 23) _____
- 24) _____



Gloucester City Fire Department

One North King Street
Gloucester City, New Jersey 08030
Telephone (856) 456-0060
Fax (856) 456-0882
Brian P. Hagan, Chief of Department

Hazardous Materials
Response Invoice

Motor Vehicle / Incidental

HAZARDOUS MATERIALS RESPONSE INVOICE

Responsible Party

Name:

[Redacted]

Address:

[Redacted] Apt. [Redacted]

City:

Philadelphia

State:

PA

Zip:

[Redacted]

Telephone:

[Redacted]

Incident Date:

07/03/2016

Incident Number:

[Redacted]

NJDEP #:

16-07-05-1338

Rep. Number:

53

Qty Hrs	Description	Unit Price	Total
1	Hazardous Materials Response - (Level I - Incidental) (Includes Single Company Response; Notifications; Assessment; Isolation/containment); Time equals 1 hour or less. Containment Materials = 1 bag of absorbent and/or 1 "vehicle response kit".		500.00
	Hazardous Materials Response - (Level II or III) (Includes Vehicles/Units, Time and Reusable Materials. Assessment/Monitoring; Entries; Offensive Techniques; Notifications; Participation in Unified Command, etc.) Rate = \$500.00 per hour NOTE: Incidents of greater duration and/or requiring additional materials will be billed on a time and material basis.		
	Hazardous materials Response (Level I or above) are charged by the hour and will be listed below; Disposable Expended & Vehicle Charges:		

Net 30 Days

Total: 500.00

If this invoice is being forwarded to your insurance company for payment, please provide the Gloucester City Fire Department with proof of such claim being filed.

Pursuant to Ordinance 10-1992























