



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 100184

Date Received

Repository ☐

2004 FEB 19 PM 2:42
05-JAN-2004

Reference No.
10053380

OWNER INFORMATION (Type or Print)

Name

Address

City GARDNERVILLE

State NV

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? ☐ YES ☒ NO
In the absence of an authorization, NHTSA WILL NOT provide your name or address to the vehicle manufacturer.

Signature of Owner Date 3 JAN 10 Y

VEHICLE INFORMATION

17 digit Vehicle Identification Number Located at bottom of windshield on driver's side
4S3BH67502

Make
SUBARU

Model
OUTBACK

Model Year
2002

Date Purchased

Dealer's Name and Telephone Number

Engine:
No. Cylinders

Fuel Type:

Original Owner
☒

Dealer's City

State

Zip Code

Transmission Type

☐ Antilock Brakes

Powertrain

☐ Cruise Control

Vehicle Component Code

101000 POWER TRAIN:CLUTCH ASSEMBLY

Multiple Failures: 2

FAILED COMPONENT(S)/PART(S) INFORMATION

Incident Date(s)
03-JAN-2004

Failure Mileage
25000

Failure Speed

ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A TIRE FAILURE

Tire Make

Tire Model (Name or Number)

Tire Size (Example P215/85R15)

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).

WHILE DRIVING AT LOWER SPEEDS CLUTCH INTERMITTENTLY SHUDDERED WHEN PULLING OUT FROM A STOP. VEHICLE HAD BEEN TO TWO DEALERS, WHO COULD NOT RESOLVE THE PROBLEM. *AK

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.