

[REDACTED]
[REDACTED] Arnold, California [REDACTED]

Telephone [REDACTED]

Facsimile [REDACTED]

10/16/2006

National Highway Transportation Safety Association
Office of Defects Investigation NVS - 216
400 7th Street S. W.
Washington D.C. 20590

June 25, 2006

Subject: 2004 Subaru L. L. Bean Outback VIN 4S3BH806X47 [REDACTED] Malfunction:

On July 7, 2006 at about 1300, I drove this vehicle into a parking space at the Sonora Hospital Complex for a medical appointment. The vehicle was stopped with my foot on the brake pedal to shift into Park via Neutral and Reverse. At this point the engine accelerated uncontrollably causing the vehicle to vibrate violently and launch forward over the parking barriers, through the shrubbery onto the down slope where it rolled over. My foot DID NOT slip off the brake onto the gas pedal.

Fire/Rescue Crews extracted me from the vehicle via the back hatch due to doors being crushed or otherwise inoperative. My seat belt, being still attached, saved me from any broken bones. In essence I was tumble-dried. The Air Bags did not deploy. AAA, our Auto Insurer, declared the vehicle a total loss.

The Sonora Police Officer, J. Sebring, Badge #707, investigated the accident and his report is filed under Case #06-1977. I was asked if I had backed into the parking space as he found the gearshift lever in the REVERSE position, A POSITION IT COULD NOT HAVE BEEN IN WITHOUT MY FOOT ON THE BRAKE PEDAL. Or did the VEHICLE MALFUNCTION more than we thought? I'm inclined to believe it was just part of my moving the lever towards the Park position. The vehicle did go FORWARD.

On February 6th, 2004, my husband, Ehrling N. Carlsen was driving from our home in Arnold, California to a business appointment in Sacramento. About five miles from the house the vehicle began to accelerate uncontrollably and automatically change gears for no reason. With great difficulty he got the vehicle to the Subaru Shop in Angels Camp trying Cruise Control, Manual Shifting, Foot Brake and Hand Brake. The Shop Foreman's Receipt States "Customer complains that at 45 MPH experienced a jolt and shudder & a thud, @ 3000 RPM put Cruise Control on, RPM went to 2100 with a jolt also experienced low grinding sound while idling in Park. Copy of this and the repair form are included for proof of VEHICLES MALFUNCTION. No Check Engine Light ever came on.

About two weeks before the June 7, 2006 VEHICLE MALFUNCTION, I experienced a hesitation in shifting and variation in engine speed when starting up the Power House Grade above Murphy's. I advised my Husband and he called the Subaru Shop Foreman with this information. He was asked if the Check Engine Light had come on. It had not. My husband drove the vehicle to Sonora and it performed normally until he started up the same grade and

Ans to 7/10/06

the hesitation in shifting and engine speed variation started. No Check Engine Light came on. We decided to take the vehicle to the shop twenty miles away, at our first opportunity, but what could we tell them? Needless to say, fate intervened and we never got there.

A check of Web Sites shows this Unintended Acceleration in Subaru's as well as other vehicles far more widespread than realized. We submit this report to encourage investigation into the matter since the Manufacturer is disinclined to admit the problem even exists let alone do anything about it. AAA, our Auto Insurer, has taken the position that the VEHICLE MALFUNCTION is 100% my fault since there were no other persons involved in the incident to proceed against. They will increase our auto insurance accordingly

I feel this is a very serious situation that should be addressed. Fortunately I was the only one involved. I shudder to think of what could have happened.

Sincerely,

[REDACTED]

*CC: Fred D. Adcock
Executive Vice President
Subaru of America Inc.
Subaru Plaza
P.O. Box 6000
Cherry Hill, NJ 08034-6000*

*California State Automobile Association
Krystal Ching Claim #24-E3-12-61-5
P.O. Box 920
Suisun City, CA 94585-0920*

STATE OF CALIFORNIA
TRAFFIC COLLISION REPORT
 CHP 556 Page 1 (Rev 7-03) OPI 081

Page 1

SPECIAL CONDITIONS PRIVATE PROPERTY ROLL OVER COMPLAINT OF PAIN		NO. INJURED 1		HIT & RUN FELLOW ☐		CITY SONORA		JUDICIAL DISTRICT TUOLUMNE SUPERIOR		LOCAL REPORT NUMBER 06-1077			
		NO. KILLED 0		HIT & RUN MISC ☐		COUNTY TUOLUMNE		REPORTING DISTRICT BEAT 5501					
LOCATION	COLLISION OCCURRED ON: DELNERO DR						MO DAY YEAR 06/07/2006		TIME 1315		NOC # 5501		
	MILEPOST INFORMATION						DAY OF WEEK WEDNESDAY		TOW AWAY ☒ YES ☐ NO		PHOTOGRAPHS BY: ☐ NONE C. ELLIS		
	AT INTERSECTION WITH OR								STATE HWY REL ☐ YES ☒ NO				
PARTY 1		DRIVERS LICENSE NUMBER		STATE CA	CLASS C	AIRBAG M	SAFETY EQUIP. G	VEH YEAR 2004	MAKE/MODEL/COLOR SUBARU/LEGACY/GRY		LICENSE NUMBER	STATE CA	
DRIVER ☒		NAME [REDACTED]						OWNER NAME ☒ SAME AS DRIVER					
PEDEST ☐		STREET ADDRESS [REDACTED]						OWNER ADDRESS ☒ SAME AS DRIVER					
PRO VEH ☐		CITY/STATE/ZIP ARNOLD, CA [REDACTED]						DISPOSITION OF VEHICLE ON ORDERS OF: ☐ OFFICER ☒ DRIVER ☐ OTHER TOWED BY VICS					
BICYCLIST ☐		SEX F	HAIR BRO	EYES HAZ	HEIGHT 5'8"	WEIGHT 132	BIRTHDATE 11/18/1932	RACE W	PRIOR VEH. DEFECTS ☒ NONE APP. ☐ REFER TO NARRATIVE		VEHICLE IDENTIFICATION NUMBER: 4S3BHB06X47630660		
OTHER ☐		HOME PHONE [REDACTED]		BUSINESS PHONE		CHP USE ONLY VEHICLE TYPE		DESCRIBE VEHICLE DAMAGE ☐ LINK ☐ NONE ☐ MINOR ☒ MAJOR ☒ ROLL-OVER		SHADE IN DAMAGED AREA [REDACTED]			
		INSURANCE CARRIER AAA		POLICY NUMBER E3-12-61-5		DIR OF TRAVEL EAST		ON STREET OR HIGHWAY DELNERO DR		SPEED LIMIT 15		CA _____ DOT _____ CAL-T _____ TOP/PSO _____	
PARTY 2		DRIVERS LICENSE NUMBER		STATE	CLASS	AIRBAG	SAFETY EQUIP.	VEH YEAR	MAKE/MODEL/COLOR		LICENSE NUMBER	STATE	
DRIVER ☐		NAME						OWNER NAME ☐ SAME AS DRIVER					
PEDEST ☐		STREET ADDRESS						OWNER ADDRESS ☐ SAME AS DRIVER					
PRO VEH ☐		CITY/STATE/ZIP						DISPOSITION OF VEHICLE ON ORDERS OF: ☐ OFFICER ☐ DRIVER ☐ OTHER					
BICYCLIST ☐		SEX	HAIR	EYES	HEIGHT	WEIGHT	BIRTHDATE	RACE	PRIOR VEH. DEFECTS ☐ NONE APP. ☐ REFER TO NARRATIVE		VEHICLE IDENTIFICATION NUMBER:		
OTHER ☐		HOME PHONE		BUSINESS PHONE		CHP USE ONLY VEHICLE TYPE		DESCRIBE VEHICLE DAMAGE ☐ LINK ☐ NONE ☐ MINOR ☐ MAJOR ☐ ROLL-OVER		SHADE IN DAMAGED AREA			
		INSURANCE CARRIER		POLICY NUMBER		DIR OF TRAVEL		ON STREET OR HIGHWAY		SPEED LIMIT		CA _____ DOT _____ CAL-T _____ TOP/PSO _____	
PARTY 3		DRIVERS LICENSE NUMBER		STATE	CLASS	AIRBAG	SAFETY EQUIP.	VEH YEAR	MAKE/MODEL/COLOR		LICENSE NUMBER	STATE	
DRIVER ☐		NAME						OWNER NAME ☐ SAME AS DRIVER					
PEDEST ☐		STREET ADDRESS						OWNER ADDRESS ☐ SAME AS DRIVER					
PRO VEH ☐		CITY/STATE/ZIP						DISPOSITION OF VEHICLE ON ORDERS OF: ☐ OFFICER ☐ DRIVER ☐ OTHER					
BICYCLIST ☐		SEX	HAIR	EYES	HEIGHT	WEIGHT	BIRTHDATE	RACE	PRIOR VEH. DEFECTS ☐ NONE APP. ☐ REFER TO NARRATIVE		VEHICLE IDENTIFICATION NUMBER:		
OTHER ☐		HOME PHONE		BUSINESS PHONE		CHP USE ONLY VEHICLE TYPE		DESCRIBE VEHICLE DAMAGE ☐ LINK ☐ NONE ☐ MINOR ☐ MAJOR ☐ ROLL-OVER		SHADE IN DAMAGED AREA			
		INSURANCE CARRIER		POLICY NUMBER		DIR OF TRAVEL		ON STREET OR HIGHWAY		SPEED LIMIT		CA _____ DOT _____ CAL-T _____ TOP/PSO _____	
PREPARED BY JONATHAN R SEBRING JS2				DISPATCH NOTIFIED ☒ YES ☐ NO ☐ NA				REVIEWED BY SGT. [Signature]				DATE REVIEWED 6-11-06	

RTP

DATE OF COLLISION (MO, DAY, YEAR) 06/07/2006		TIME (24HR) 1315	NO. # 5501	OFFICER I.D. JSZ	NUMBER 06-1077
PROPERTY DAMAGE	OWNER			OWNER ADDRESS	NOTIFIED ☐ YES ☐ NO
	DESCRIPTION OF DAMAGE				

SEATING POSITION 	OCCUPANTS A - NONE IN VEHICLE B - UNKNOWN C - LAP BELT USED D - LAP BELT NOT USED E - SHOULD HARNESSED F - SHOULD HARNESSED NOT USED G - LAP/SHOULDER HARNESSED H - LAP/SHOULDER HARNESSED NOT USED J - PASSIVE RESTRAINT USED K - PASSIVE RESTRAINT NOT USED	SAFETY EQUIPMENT L - AIR BAG DEPLOYED M - AIR BAG NOT DEPLOYED N - OTHER P - NOT REQUIRED Q - IN VEHICLE USED R - IN VEHICLE NOT USED S - IN VEHICLE USE UNKNOWN T - IN VEHICLE IMPROPER USE U - NONE IN VEHICLE V - NO W - YES X - NO Y - YES Z - NOT EJECTED 1 - FULLY EJECTED 2 - PARTIALLY EJECTED 3 - UNKNOWN		INATTENTION CODES A - CELLPHONE HANDHELD B - CELLPHONE HANDSFREE C - ELECTRONIC EQUIPMENT D - RADIO/CD E - SMOKING F - EATING G - CHILDREN H - ANIMALS I - PERSONAL HYGIENE J - READING
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ITEMS MARKED BELOW FOLLOWED BY AN ASTERISK (*) SHOULD BE EXPLAINED IN THE NARRATIVE

PRIMARY COLLISION FACTOR - LIST NUMBER (IN OF PARTY AT FAULT)		TRAFFIC CONTROL DEVICES			SPECIAL INFORMATION			MOVEMENT PRECEDING COLLISION		
1	A. WE SECTION VIOLATED: CITED ☐ YES ☒ NO	A	B	C	1	2	3	1	2	3
	B. OTHER IMPROPER DRIVING*									
	C. OTHER THAN DRIVER*									
	D. UNKNOWN*									
	E. FELL ASLEEP*									
WEATHER (MARK 1 TO 2 ITEMS)		TYPE OF COLLISION			OTHER ASSOCIATED FACTORS (MARK 1 TO 2 ITEMS)			SOBERITY - DRUG PHYSICAL (MARK 1 TO 2 ITEMS)		
	X A. CLEAR									
	B. CLOUDY									
	C. RAINING									
	D. SNOWING									
	E. FOGGABILITY									
	F. OTHER*									
LIGHTING		MOTOR VEHICLE INVOLVED WITH			OTHER ASSOCIATED FACTORS (MARK 1 TO 2 ITEMS)			SOBERITY - DRUG PHYSICAL (MARK 1 TO 2 ITEMS)		
	X A. DAYLIGHT									
	B. DUSK - DAWN									
	C. DARK - STREET LIGHTS									
	D. DARK - NO STREET LIGHTS									
	E. DARK - STREET LIGHTS NOT FUNCTIONING									
ROADWAY SURFACE		PEDESTRIAN ACTIONS			OTHER ASSOCIATED FACTORS (MARK 1 TO 2 ITEMS)			SOBERITY - DRUG PHYSICAL (MARK 1 TO 2 ITEMS)		
	X A. DRY									
	B. WET									
	C. SNOWY - ICY									
	D. SLIPPERY (MUDDY, OILY, ETC.)									
ROADWAY CONDITIONS (MARK 1 TO 2 ITEMS)		PEDESTRIAN ACTIONS			OTHER ASSOCIATED FACTORS (MARK 1 TO 2 ITEMS)			SOBERITY - DRUG PHYSICAL (MARK 1 TO 2 ITEMS)		
	A. HOLES, DEEP RUT*									
	B. LOOSE MATERIAL ON ROADWAY*									
	C. OBSTRUCTION ON ROADWAY*									
	D. CONSTRUCTION - REPAIR ZONE									
	E. REDUCED ROADWAY WIDTH									
	F. FLOODED*									
	G. OTHER*									
	X H. NO UNUSUAL CONDITIONS									

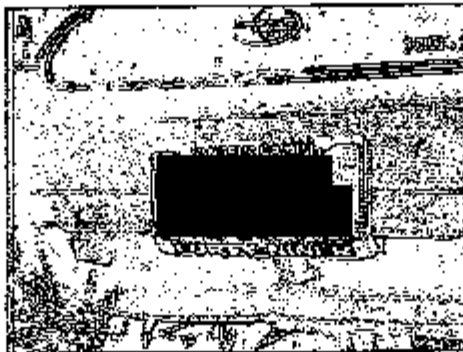
SKETCH 	PARALLEL LOT 	MISCELLANEOUS
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INDICATE NORTH

DE HARR DELINE



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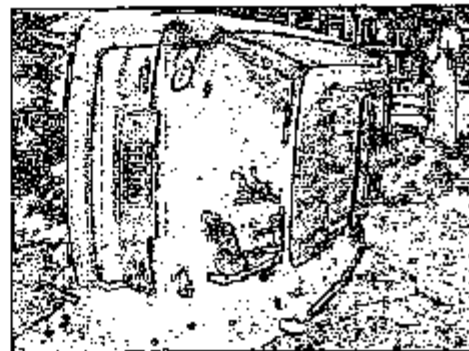
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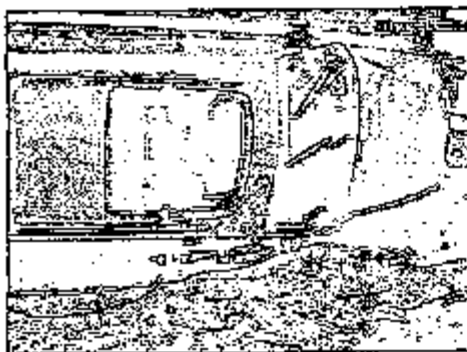
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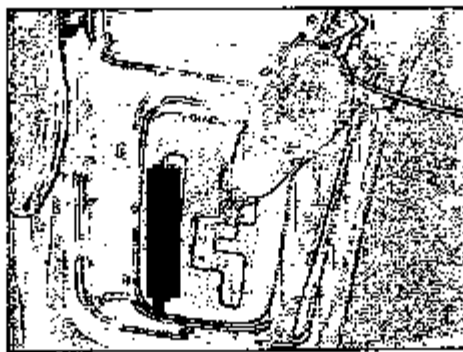
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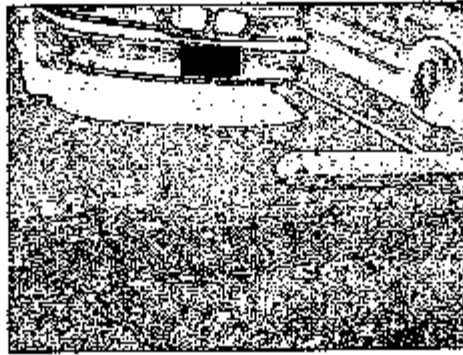
100 S GREEN ST SONORA, CA 95370 532-8143

IMAGE GALLERY FOR CASE 06-1077

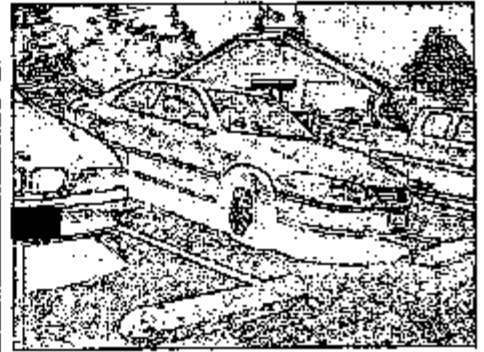
06/11/2006



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STATE OF CALIFORNIA
TRAFFIC COLLISION CODING
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DATE OF COLLISION (MO, DAY YEAR) 06/07/2006				TIME (MM:SS) 1315		NCIC # 5501		OFFICER I.D. JSZ				NUMBER 06-1077							
WITNESS ONLY ☐	PASSENGER ONLY ☐	AGE 73	SEX F	EXTENT OF INJURY ('X' ONE)				INJURED WAS ('X' ONE)					PARTY NUMBER	SEAT ROB; 1	SAFETY EQUIP G	EJECTED 0			
				FATAL INJURY ☐	SEVERE INJURY ☐	OTHER VISIBLE INJURY ☐	COMPLAINT OF PAIN ☒	DRIVER ☒	PASS. ☐	PEO. ☐	BICYCLIST ☐	OTHER ☐							
NAME/DOB/ADDRESS [REDACTED] (11/18/1932) [REDACTED], ARNOLD, CA [REDACTED]												TELEPHONE [REDACTED]							
INJURED ONLY) TRANSPORTED BY SELF												TAKEN TO DESTINATION							
DESCRIBE INJURIES REFUSED MEDICAL TREATMENT AT SCENE. STATED HER BODY WAS SORE AND THAT SHE WOULD SEEK MEDICAL TREATMENT LATER IF NEEDED.																			
☐ VICTIM OF VIOLENT CRIME NOTIFIED																			
☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐			
NAME/DOB/ADDRESS												TELEPHONE							
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DESCRIBE INJURIES																			
☐ VICTIM OF VIOLENT CRIME NOTIFIED																			
NAME OF PREPAYER JONATHAN R SEBRING												EO. NUMBER JSZ		MO. DAY YEAR 06/07/2006		NAME OF REVIEWER		MO. DAY YEAR	

NARRATIVE/SUPPLEMENTAL

CHP 555 (Rev. 7-90) OPI 042

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DATE OF INCIDENT/OCCURRENCE 06/07/2006	TIME (2400) 1315	NCIC NUMBER 5501	OFFICER I.D. NUMBER JS2	NUMBER 06-1077
☒ ONE ☐ Narrative Supplement		☐ ONE ☐ Collision Report ☐ Other:		TYPE SUPPLEMENTAL (X APPLICABLE) ☐ BA update ☐ Hazardous Materials ☐ Fatal ☐ School bus ☐ Hit and run update ☐ Other:
CITY/COUNTY/JUDICIAL DISTRICT SONOMA/TUOLUMNE/TUOLUMNE SUPERIOR				REPORTING DISTRICT/BEAT 5501
LOCATION/SUBJECT DELNERO DR/				STATE HIGHWAY RELATED ☐ Yes ☒ No

NOTIFICATION:

I received a call of a roll over collision with fire and ambulance on scene at 1315 hours. I responded from 100 S. Green Street and arrived on scene at 1320 hours. All times, speeds and measurements in this investigation are approximate. All measurements were taken by roll meter.

STATEMENTS:

Party #1 (P-1, Carlsen) was contacted at the scene and related the following information. She was driving V-1 (Subaru) southbound in the Pauline Court Medical Office's parking lot. As she was pulling into a marked parking space facing southbound, for unknown reasons, V-1 accelerated forward. V-1 continued southbound over a curb, and down a short ravine where the right front side of V-1 collided with a large rock causing V-1 to roll over one time. V-1 came to rest on its right side. P-1 was helped out of V-1 by the fire department. She complained of body pain, but denied medical attention.

P-1 seemed very confused about what caused her vehicle to accelerate. P-1 stated she "thought" that she pushed the brakes and not the accelerator, but she was not sure. When I asked her other questions about the accident, she could not remember anything.

When the Vic's Towing driver flipped V-1 back onto its wheels, he was able to drive the vehicle to his tow truck. The brakes and accelerator functioned properly for him.

SUMMARY:

P-1 (Carlsen) was driving V-1 (Subaru) southbound in the Pauline Court Medical Offices parking lot. As P-1 was pulling V-1 into a marked parking space, for unknown reasons, P-1 lost control of V-1, and V-1 accelerated over a curb, continued down a short ravine, and collided with a large rock. The collision with the rock caused V-1 to roll over one time. V-1 came to rest on its right side. P-1 was helped out of her vehicle by first responders. P-1 was treated at the scene and refused any further medical treatment.

AREA OF IMPACT:

The area where the right front of V-1 collided with the large rock was located 25 feet 1 inches north of the north curd line of Delnaro Street and 380 feet 4 inches west of the west prolongation line of Greenley Road. The area of impact was determined by the placement of V-1 at the scene.

PREPARED BY NAME AND I.D. NUMBER JONATHAN R. SEBRING JS2	Date: 06/10/2006	REVIEWER'S NAME	DATE
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Use previous editions until depleted.

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NARRATIVE/SUPPLEMENTAL

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DATE OF INCIDENT/OCCURRENCE 06/07/2006		TIME (2400) 1315	INCIDENT NUMBER 5501	OFFICER I.D. NUMBER JS2	NUMBER 06-1077
☒ ONE ☒ Narrative Supplement		☐ ONE ☐ Collision Report ☐ Other:		TYPE SUPPLEMENTAL (*X APPLICABLE) ☐ BA update ☐ Field ☐ Hazardous Materials ☐ School bus ☐ Hit and run update ☐ Other:	
CITY/COUNTY/JUDICIAL DISTRICT SONORA/TUOLUMNE/TUOLUMNE SUPERIOR					REPORTING DISTRICT/BEAT 5501
LOCATION/SUBJECT DELNERO DR/					STATE HIGHWAY RELATED ☐ Yes ☒ No
<u>CAUSE:</u> P-1 (Carlsen) caused this collision by failing to keep her vehicle under control. It is unknown what P-1 did to cause this collision. <u>RECOMMENDATIONS:</u> None.					
PREPARED BY NAME AND I.D. NUMBER JONATHAN R. SEBRING JS2		Date: 06/10/2006	REVIEWER'S NAME		DATE

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THE ATTACHMENTS TO THIS
DOCUMENT HAVE BEEN REMOVED
TO PROTECT UNWARRANTED
INVASION OF PERSONAL PRIVACY
PURSUANT TO EXEMPTION 6 OF
THE FREEDOM OF INFORMATION
ACT (FOIA), 5 U.S.C. 552(b)(6).