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	Repository
17-JAN-2007	Reference No. 10178946

OWNER INFORMATION (Type or Print)

Name	Daytime Telephone Number	E-mail Address
[redacted]	[redacted]	[redacted]
Address [redacted]	Evening Telephone Number	
City CAIRO **State** NY **Zip Code** [redacted]		

Do you authorize NHTSA to provide a copy of this report to the manufacturer of your vehicle? [X] YES [ ] NO
In the absence of an authorization, NHTSA WILL NOT provide your name or address to the vehicle manufacturer.
Signature of Owner _____ Date __/__/__

VEHICLE INFORMATION

17 digit Vehicle Identification Number Located at bottom of windshield on driver's side	Make	Model	Model Year
JF1GC67501[redacted]	SUBARU	IMPREZA	2001

Date Purchased	Dealer's Name and Telephone Number			Engine:	Fuel Type:
12-OCT-06	B&B GARAGE 5189435582			No: Cylinders 4	Gas
Original Owner [ ]	Dealer's City CATSKILL	State NY	Zip Code 12414		

Transmission Type			Powertrain	Vehicle Component Code
MANUAL	[X] Antilock Brakes	[X] Cruise Control	ALL WHEEL DRIVE	141000 AIR BAGS:FRONTAL
				Multiple Failure: 1

FAILED COMPONENT(S)/PART(S) INFORMATION

Incident Date(s)	Failure Mileage	Failure Speed
26-DEC-2006	121000	40/45

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: DOTMAL9ABC036)	[ ] 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	Fire	Number of Persons Injured	Number of Deaths	Reported to Police
[X] Yes [ ] No	[ ] Yes [X] No	1	0	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 OWNS A 2001 SUBARU IMPREZA. THE CONTACT WAS INVOLVED IN A COLLISION WHILE DRIVING AT 40 MPH. ~~DUE TO A LOSS OF STEERING, THE CONSUMER HIT A TREE AND THE VEHICLE WAS DESTROYED. THERE WERE NO INJURIES~~. THE STEERING WHEEL BECAME DISCONNECTED FROM THE VEHICLE AND THE DRIVER SIDE AIR BAG DIDN'T DEPLOY. HOWEVER, THE PASSENGER SIDE AIR BAG DEPLOYED. ~~THE CONTACT STATED THAT THERE WAS NO POLICE REPORT FILED~~. THE FAILURE MILEAGE WAS 121,000. *JB

* contact blacked out and doesn't remember what happened. The contact hit old cement guardrail post and then hit two trees car was totaled. The Steering wheel broke off from steering column causing air bag to not deploy. Police Report was filed.

Include, if available: Police/Fire Department Report, Photos, and Repair Invoice. ATTACH ADDITIONAL SHEETS IF NECESSARY

Narrative Description of Incident(s), Failure(s), Crash(es), and Injury(ies)

Police report has not been obtained by the Contact. Accident report was filed with Sheriff's Office in Northern Dutchess County phone# 845-486-3800. Accident occurred at 6:14 am Dec 26, 2006. In closed are pictures of car and steering wheel.

ATTACH ADDITIONAL SHEETS IF NECESSARY

DOT
NATIONAL HIGHWAY
TRAFFIC SAFETY ADM
400 7TH ST SW
WASHINGTON DC 20590

OFFICIAL BUSINESS

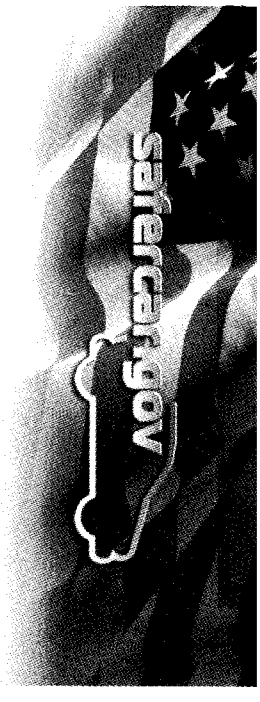
HUDSON NY 125
06 MAR 2007 PM 1 T

NO POSTAGE NECESSARY IF MAILED IN THE UNITED STATES

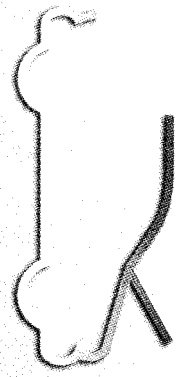
BUSINESS REPLY MAIL
FIRST-CLASS MAIL PERMIT NO 1888 WASHINGTON DC

POSTAGE WILL BE PAID BY ADDRESSEE

US DEPARTMENT OF TRANSPORTATION
NATIONAL HIGHWAY TRAFFIC SAFETY ADMINISTRATION
OFFICE OF DEFECTS INVESTIGATION, NVS-210
400 7TH ST SW
WASHINGTON DC 20077-8214



Think your vehicle has a safety defect?



If so:

Use the enclosed form to file a report.

or visit:

www.safercar.gov

or call:

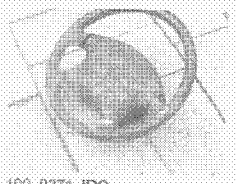
Vehicle Safety Hotline

888-327-4236

www.nhtsa.gov

NHTSA

Vehicle Owner's Questionnaire (VOQ)
U.S. Department of Transportation
National Highway Traffic Safety Administration



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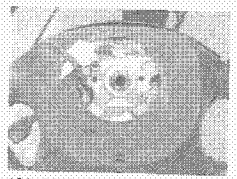

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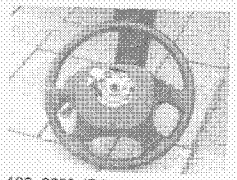

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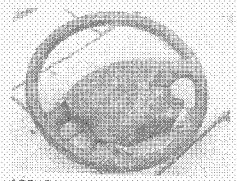

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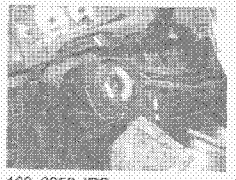

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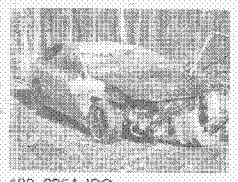

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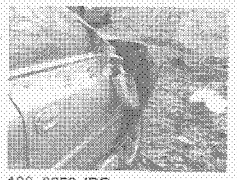

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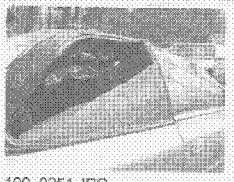

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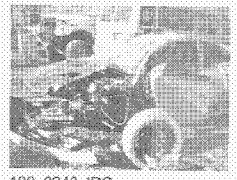

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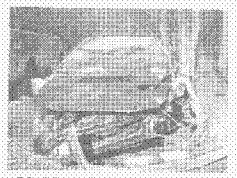

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