



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

02-MAY-2007

Repository ☐

Reference No.
10189516

OWNER INFORMATION (Type or Print)

Name

Address

City

RANGELEY

State

ME

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 / /

VEHICLE INFORMATION

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

4S3BK4350T6

Make

SUBARU

Model

LEGACY

Model Year

1996

Date Purchased
04-APR-04

Dealer's Name and Telephone Number

Engine:

No: Cylinders 4

Fuel Type:

Gas

Original Owner

Dealer's City

State

Zip Code

Transmission Type

MANUAL

☒ Antilock Brakes

☒ Cruise Control

Powertrain

ALL WHEEL DRIVE

Vehicle Component Code

071110 FUEL SYSTEM, GASOLINE;STORAGE:TANK ASSEMBLY:FILLER

Multiple Failure: 1

FAILED COMPONENT(S)/PART(S) INFORMATION

Incident Date(s)

02-MAY-2007

Failure Mileage

110000

Failure Speed

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

0

0

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 OWNS A 1996 SUBARU LEGACY. WHILE FILLING THE GAS TANK THE CONTACT NOTICED A PUDDLE OF GAS FORMING UNDER THE VEHICLE. THE FILLER PIPE RUSTED THROUGH AND CAUSED THIN HOLES. THE CURRENT AND FAILURE MILEAGES WERE 110,000.*AK DEALER FROM WHOM I BOUGHT THE NEW FILLER PIPE HAD SEVERAL ON HAND, SAID THIS IS A VERY COMMON FAILURE ON THESE CARS AND EVEN MORE COMMON ON THE "FORESTER" MODEL OF THE SAME CAR.

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.