



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 2007 SEP 27
(1-888-327-4236)
INTERNET: www.nhtsa.dot.gov/hotline

FOR AGENCY USE ONLY 100148

Date Received

PM 3:06
31-MAY-2007

Repository

Reference No.
10192125

OWNER INFORMATION (Type or Print)

Name [Redacted]
Address [Redacted]
City DENVER State CO Zip Code [Redacted]

Daytime Telephone Number [Redacted]

E-mail Address [Redacted]

Evening Telephone Number [Redacted]

Do you authorize NHTSA to release this report to the manufacturer of your vehicle? YES NO
In the absence of an answer, we will NOT provide your name or address to the vehicle manufacturer.
Signature of Owner [Redacted] Date 9/20/07

VEHICLE INFORMATION

17 digit Vehicle Identification Number Located at bottom of windshield on driver's side: 4S4BJ65C7M7 [Redacted]
Make SUBARU Model LEGACY Model Year 1991
Date Purchased 31-MAY-05 Dealer's Name and Telephone Number GO Subaru
Engine: No: Cylinders 4
Original Owner Dealer's City Centennial State CO Zip Code 80111
Transmission Type AUTOMATIC Antilock Brakes Cruise Control Powertrain ALL WHEEL DRIVE
Vehicle Component Code 151300 SEAT BELTS:FRONT:RETRACTOR
Multiple Failure: 2

FAILED COMPONENT(S)/PART(S) INFORMATION

Incident Date(s) 26-MAY-2007 Failure Mileage 176000 Failure Speed Automatic Seat belt froze

ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A TIRE FAILURE

Tire Make [Redacted] Tire Model (Name or Number) [Redacted] Tire Size (Example P215/65R15) [Redacted]
DOT No. (Example: DOTM19ABC036) Original Equipment Prior Repair Failure Location: [Redacted]
Tire Component Code [Redacted] Tire Failure Type [Redacted]

ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A CHILD SEAT FAILURE

Make: [Redacted] Date Manufactured: [Redacted] Model No./Name: [Redacted]
Seat Type: [Redacted] Installation System: [Redacted]
Child Seat Component Code: [Redacted] Failed Part: [Redacted]

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).

TL*THE CONTACT OWNS A 1991 SUBARU LEGACY. THE CONTACT STATED THAT THE ELECTRIC SEAT BELT JAMS IN THE MIDDLE AND RENDERS THE SEAT BELT INOPERABLE. THE DEALER WILL NOT REPAIR THE VEHICLE FREE OF CHARGE. THE VIN WAS UNKNOWN. THE CURRENT AND FAILURE MILEAGES WERE 176,000.

Electric seat belt replaced with used part and on August 10, 2007 used part failed.
Replaced seat belt again September 9, 2007 with used part.
New part price \$400.

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.