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: JUN 12 2012 (07-MAY-2012)

Repository ☐

Reference No.: 10457633

OWNER INFORMATION (Type or Print)

Name: [redacted]

Address: [redacted]

City: ASHVILLE | State: NC | Zip Code: [redacted]

Daytime Telephone Number: [redacted]

Evening Telephone Number:

E-mail Address: [redacted]

The information you provide will be used to identify potential safety-related defects. We may share your information with the applicable vehicle manufacturer during an investigation or recall in accordance with the routine uses described in the agency's Privacy Act notice. See 49 FR 53971 (Sep. 3, 2004).

VEHICLE INFORMATION

17 digit Vehicle Identification Number Located at bottom of windshield on driver's side	Make	Model	Model Year
JF1SG63604G[redacted] Purchase new Prestige Subaru	SUBARU Asheville	FORESTER	2004

Date Purchased	Dealer's Name and Telephone Number	Engine: No: Cylinders	Fuel Type:
9/16/2011	Individual-original owner Ted 828-206-2737 Hayes	4	Gas

Original Owner ☐

Dealer's City: I am 2nd owner - Al Nichols | State: NC | Zip Code: 28804

Transmission Type		Powertrain	Multiple Failure:	Incident Date(s)
Man.	☑ Antilock Brakes ☑ Cruise Control	2.5L	No	06-MAY-2012

FAILED COMPONENT(S)/PART(S) INFORMATION

Vehicle Component Code: 020000 SUSPENSION

Failure Mileage: 189000

Failure Speed: 5

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
☐ Yes ☒ No	☐ Yes ☒ No			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 2004 SUBARU FORESTER. WHILE DRIVING APPROXIMATELY 5 MPH IN REVERSE, THERE WAS A LOUD CLUNKING NOISE AND SUDDENLY THE FRONT DRIVER'S SIDE COLLAPSED TO THE GROUND. THE CONTACT NOTICED THE LOWER CONTROL ARM FRACTURED. THE VEHICLE WAS IN THE PROCESS OF BEING TOWED TO THE DEALER. THERE WAS A RECALL ASSOCIATED WITH NHTSA CAMPAIGN ID NUMBER 11V464000 (SUSPENSION: FRONT: CONTROL ARM: LOWER ARM). THE VEHICLE WAS INELIGIBLE UNDER THE RECALL DUE TO THE VEHICLE NOT BEING ORIGINALLY SOLD OR REGISTERED IN THE STATES MENTIONED IN THE RECALL DEFECT. THE MANUFACTURER WAS NOTIFIED OF THE PROBLEM. THE APPROXIMATE FAILURE MILEAGE WAS 189,000.

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

NHTSA
1200 New Jersey Avenue
Washington, DC 20077-9382

June 28, 2012

[redacted]
Asheville, NC [redacted]

Dear Investigator,

The information enclosed on the questionnaire is correct. Since the time of my report to NHTSA, the dealership in Asheville, NC, Prestige Subaru held the car for a "regional representative" to inspect the vehicle. According to the assistant manager in the repair department, the regional representative found nothing to be warranted because of "the mileage and age of the vehicle".

Subaru has been informed that a vehicle outside of the recall zone, in my opinion, is experiencing failure described under 11V46400 recall. Additionally, Subaru corporate was advised and a reference number of 1-199-3263889 was issued.

A receipt of repairs at a local Subaru specialist is enclosed per your request. Additionally, pictures of the lower control on the vehicle and removed from the vehicle is enclosed. They are in my possession pending your review.

I am appreciative of NHTSA in reviewing this claim. I feel very fortunate that no accident or injury occurred. I value your expertise in guaranteeing other drivers safety related to this recall.

Sincerely,

[redacted]

REPAIR ORDER

KAT'S FOREIGN AUTO SERVICE
PO BOX 457
LEICESTER NC 28748

683 1544

NAME [redacted]	DATE 5/22/12
ADDRESS	
MAKE Subaru Forester	TYPE OR MODEL 5sp
YEAR 04	RECEIVED White A.M. P.M.
SERIAL NO. 4G[redacted]	ENGINE NO. 2.5
PROMISED A.M. P.M.	
ODOMETER 189232	LICENSE NO.
TERMS	PHONE WHEN READY ☒ YES ☐ NO
ORDER WRITTEN BY J	P [redacted]

MATERIAL USED

QTY.	PART NO.	DESCRIPTION	PRICE	WARRANTY YES	WARRANTY NO
2		Front Control Arms With Bushing/Ball Joint	600 00		
2		Sway Bar Links	68 00		
1		Rebuilt Axle	100 00		
		OUTSIDE REPAIRS			
		BROUGHT FORWARD			
		TOTAL PARTS	768 00		

QTY.	ACCESSORY NO.	ACCESSORIES	PRICE	WARRANTY YES	WARRANTY NO
		TOTAL ACCESSORIES			

DSS	ISJ		LABOR CHARGE
		Lubrication	
		Change Oil	
		Change Oil Filter Cart.	
		Change Trans.	
		Change Diff.	
		Pack Front Wheel Brgs.	
		Adjust Brakes	
		Rotate Tires	
		Wash Polish	
		State Inspection	

OPER NO.	INSTRUCTIONS
	Replaced left & Right Front Control Arm with Bushing – Ball Joints Sway Bar Links
	Replaced Left front Rebuilt Axle
	Need Left Rear Wheel Bearing going Bad

LABOR CHARGE: 165 00

You are entitled to a price estimate for the repairs you have authorized. The repair price may be less that the estimate, but will not exceed the estimate without your permission. Your signature will indicate your estimate selection.
Teardown estimate - I understand that my car will be reassembled _____ days of the date shown if I choose not to authorize the services recommended.

1. I request an estimate in writing before you begin repairs. _____
2. Please proceed with repairs, but call me before continuing if the price will exceed $ _____
3. I do not want an estimate. _____

I hereby authorize the above repair work to be done along with the necessary material, and hereby grant you and/or your employees permission to operate the car or truck herein described on streets, highways or elsewhere for the purpose of testing and/or inspection. An express mechanic's lien is hereby acknowledged on above car or truck to secure the amount of repairs thereto.

X

NOT RESPONSIBLE FOR LOSS OR DAMAGE TO CARS OR ARTICLES LEFT IN CARS IN CASE OF FIRE, THEFT OR ANY OTHER CAUSE BEYOND OUR CONTROL.

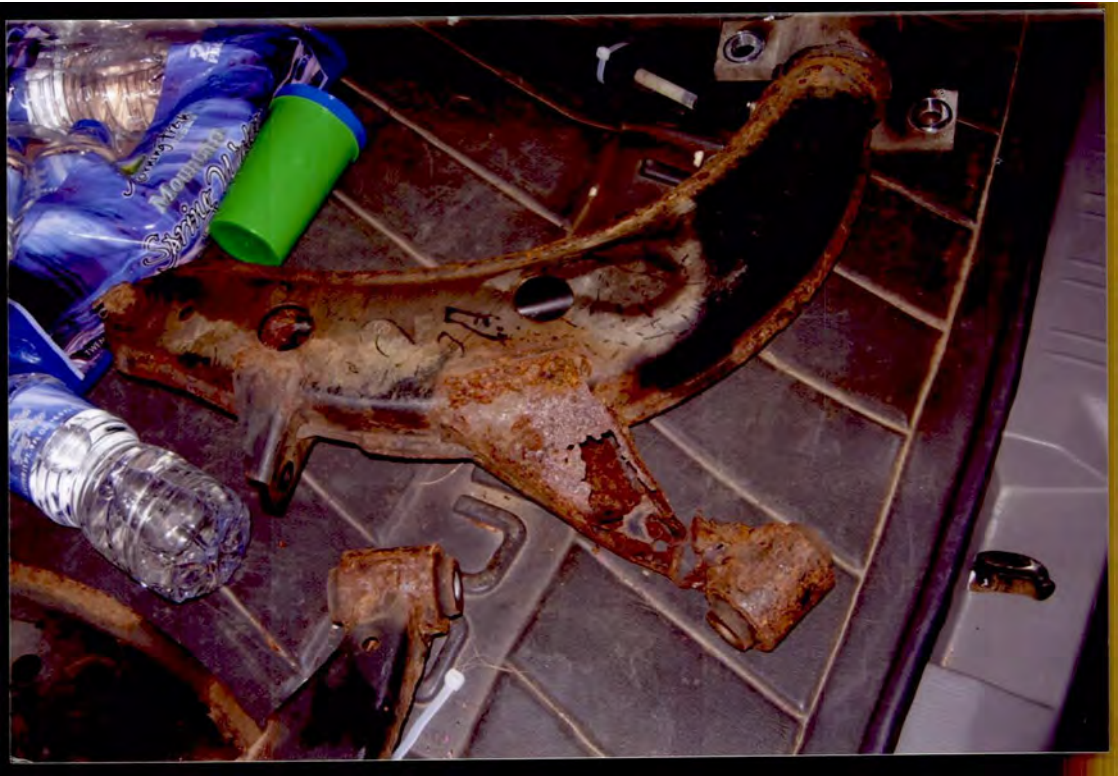
GAS, OIL, & GREASE		PRICE
GAL. GAS	@	
QTS. OIL	@	
LBS. GREASE	@	
TOTAL GAS, OIL, & GREASE		

METHOD OF PAYMENT:
☐ CASH
☐ CHECK
☐ CHARGE

LABOR:
☐ FLAT
☐ HOURLY
☐ BOTH

TOTAL LABOR	165 00
TOTAL PARTS	768 00
ACCESSORIES	
GAS, OIL, & GREASE	
OUTSIDE REPAIRS	
TAX	53 76
TOTAL AMOUNT	986 76

A-GT3810-GT3811/T-3869




BAR

[redacted]
Asheville, NC

[redacted]

USDOT – NHTSA
Office of Defects Investigation NVS-210
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Washington, D.C. 20077-9382

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