

MAR 12 2014

 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		
U.S. Department of Transportation National Highway Traffic Safety Administration				Date Received 23-JAN-2014		Repository ☐
						Reference No. 10561131
OWNER INFORMATION (Type or Print)				Daytime Telephone Number [REDACTED] CELL		E-mail Address [REDACTED]
Name [REDACTED]				Evening Telephone Number SAME		
Address [REDACTED]						
City HARRISBURG		State PA	Zip Code [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 JF1SG69674H [REDACTED]				Make SUBARU	Model FORESTER	Model Year 2004
Date Purchased 2005	Dealer's Name and Telephone Number FAULKNER SUBARU (717) 564-4545			Engine: 210 HP No: Cylinders 4	Fuel Type: UNLEADED	
Original Owner ☐	Dealer's City HARRISBURG		State PA	Zip Code 17111		
Transmission Type AUTO	☒ Antilock Brakes ☒ Cruise Control	Powertrain ALL WHEEL DRIVE		Multiple Failure:	Incident Date(s) 12 NOV 2013 7, 9, 10 JAN 2013	
FAILED COMPONENT(S)/PART(S) INFORMATION						
Vehicle Component Code: FUEL/PROPULSION SYSTEM (PWS)				Failure Mileage 117000	Failure Speed IDLING/ DRIVING	
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 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 2004 SUBARU FORESTER. THE CONTACT STATED WHEN THE TEMPERATURE DROPPED, FUEL FUMES WERE EMITTED IN AND AROUND THE VEHICLE. THE VEHICLE WAS NOT TAKEN TO THE DEALER FOR INSPECTION. THE MANUFACTURER WAS NOT MADE AWARE OF THE FAILURE. THE VEHICLE WAS NOT REPAIRED. THE FAILURE AND CURRENT MILEAGE WAS 117,000. RK ☒ UPDATE						
*SEE SHEET + COST OF REPAIR ON 1/29/14. AFTER CALL NHTSA TO INQUIRE ON RECALLS OR TSB'S. → SEVERAL COMPLAINTS ABOUT FUEL SMELL/LINES DEFECTIVE FROM SUBARU OWNERS						
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.						

1/7/14, 1/9/14 Narrative Description of Incident(s), Failure(s), Crash(es), and Injury(ies)
1/10/14 WHILE AT BUS STOP IN AM, SMELL OF GAS COMING IN CAR.
1/10/14 SMELL RAW GAS INSIDE CAR WHEN DRIVE (LOW TEMPERATURE OUTSIDE)
1/17/14 STRONG RAW GAS SMELL WHEN IDLE (LOW TEMP OUTSIDE) ON PASSENGER SIDE
1/29/14 STRONG RAW GAS SMELL WHEN IDLE + DRIVE INSIDE CAR
1/29/14 TAKE TO AUTO REPAIR SHOP: REPAIR FUEL LEAK / REMOVE + REPLACE
MANIFOLD (INTAKE MANIFOLD) TO LOCATE FUEL LEAK SOURCE
REPLACE FUEL LINES AND CLAMPS, REPLACE UPPER INTAKE
GASKET. FUEL LINES WERE CRACKED OFF. SEE INVOICE
ATTACHED FOR \$486.30 FROM TEAM ONE AUTO-
* NOTE TEMPS WERE 20° DOWN TO SINGLE DIGITS WHEN THIS
OCCURED. * + ATTACH ADDITIONAL SHEETS IF NECESSARY
BELOW OF AS WELL.

U.S. Department
of Transportation
National Highway
Traffic Safety
Administration
1200 New Jersey Avenue SE.
Washington, D.C. 20077-9382
Official Business
Penalty for Private Use \$300

HARRISBURG PA 171

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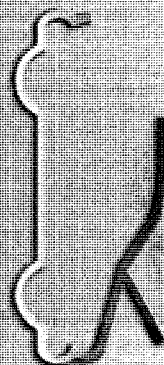
WASHINGTON, DC

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US Department of Transportation
National Highway Traffic Safety Administration
Office of Defects Investigation, NVS-210
1200 New Jersey Avenue SE.
Washington, D.C. 20077-9382



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



U.S. DEPARTMENT OF TRANSPORTATION
NATIONAL HIGHWAY TRAFFIC SAFETY ADMINISTRATION
WASHINGTON, D.C. 20590