INFORMATION REDACTED PURSUANT TO THE FREEDOM OF INFORMATION ACT (FOIA), 5 U.S.C.552(B)(6)

U.S. Department of Transportation

National Highway Traffic Safety Administration

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: 17-AUG-2020 OCT 0 6 2020	Repository ☐
	Reference No. 11349868

OWNER INFORMATION (Type or Print)

Name [redacted]		Daytime Telephone Number [redacted]	E-mail Address [redacted]
Address [redacted]		Evening Telephone Number [redacted]	
City ORCHARD PARK	State NY	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	Make	Model	Model Year
JF1SG65635[redacted]	SUBARU	FOREST ER	2005

Date Purchased	Dealer's Name and Telephone Number			Engine: No: Cylinders	Fuel Type:
	West Herr Subaru			4	GAS
Original Owner ☒	Dealer's City ORCHARD PARK	State NY	Zip Code 14127		

Transmission Type			Powertrain	Multiple Failure:	Incident Date(s)
AUTOMATIC	☒ Antilock Brakes	☒ Cruise Control	All Wheel Drive		17-AUG-2020

FAILED COMPONENT(S)/PART(S) INFORMATION

Vehicle Component Code: 020000 SUSPENSION	Failure Mileage	Failure Speed
	66709	

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 2005 SUBARU FOREST ER. THE CONTACT STATED THAT HE TOOK THE VEHICLE TO AN INDEPENDNENT MECHANIC AND WAS INFORMED THAT THE LOWER CONTROL ARM WAS DAMAGED. THE AIR CONDITIONER UNIT PRODUCED CONDENSATION THAT CAUSED THE LOWER CONTROL ARM TO RUST THROUGH ALONG WITH ROAD SALT DURING THE WINTER MONTHS. THE DAMAGE WAS ON THE Both
DRIVER'S SIDE CONTROL ARM. THE MANUFACTURER WAS CONTACTED AND STATED THAT THE VEHICLE WAS PREVIOUSLY REPAIRED UNDER NHTSA CAMPAIGN NUMBER: 11V464000 (SUSPENSION) IN 2012 AS A ONE-TIME FREE REPAIR. THE CONTACT REQUESTED TO SPEAK WITH AN UPPER LEVEL MANAGER WHICH WAS STILL PENDING. THE VEHICLE WAS NOT REPAIRED. THE FAILURE MILEAGE WAS 66,709.

Left + RT

(Subaru CALLED back but I missED THE CALL. NO MESSAGE for Return CALL

I HAVE Since Purchased BOTH CONTROL ARMS + HAVE REPLACED PARTS TO HAVE the Vehical PASS SAFETY INSPECTION.

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

Ref. No.
11349868

[redacted]
Orchard Park, NY [redacted]
[redacted]

Left Lower Control Arm
2005 Subaru Forester
Vin. JF1SG65635H[redacted]