

OF INFORMATION ACT (FOIA), 5 U.S.C.552(B)(6)

From: [DataQuality, DataQuality \(NHTSA\)](#)
To: [EVOQ \(NHTSA\)](#)
Subject: FW:
Date: Thursday, March 4, 2021 3:15:19 PM
Attachments: [REDACTED]

-----Original Message-----

From: [REDACTED]
Sent: Thursday, March 04, 2021 2:07 PM
To: DataQuality, DataQuality (NHTSA) <DataQuality@dot.gov>
Subject:

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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
18-FEB-2021

Repository
Reference No.
11396768

OWNER INFORMATION (Type or Print)

Name [REDACTED]
Address [REDACTED]
City MADERA State CA Zip Code [REDACTED]

Daytime Telephone Number [REDACTED] E-mail Address [REDACTED]
Evening Telephone Number [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: 4S3BNAF60J3 [REDACTED]
Make SUBARU Model LEGACY Model Year 2018
Date Purchased Dealer's Name and Telephone Number Engine: No: Cylinders Fuel Type:
Original Owner Dealer's City State Zip Code
Transmission Type Antilock Brakes Cruise Control Powertrain Multiple Failure: Incident Date(s) 16-FEB-2021

FAILED COMPONENT(S)/PART(S) INFORMATION

Vehicle Component Codes: 130000 VISIBILITY/WIPER (PWS), 131000 VISIBILITY: WINDSHIELD Failure Mileage 38153 Failure Speed 65

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 Yes No Fire Yes No Number of Persons Injured Number of Deaths 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 2018 SUBARU LEGACY. THE CONTACT STATED WHILE DRIVING APPROXIMATELY 65 MPH, THE CONTACT NOTICED A SMALL CRACK DEVELOPED ON THE LOWER FRONT WINDSHIELD WITHOUT IMPACT. THE VEHICLE WAS NOT TAKEN TO THE LOCAL DEALER. THE VEHICLE WAS NOT REPAIRED. THE MANUFACTURER WAS NOT INFORMED OF THE FAILURE. THE FAILURE MILEAGE WAS APPROXIMATELY 38,153.

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.