

785796

From: feedback@cartalk.com
To: Alberto <NHTSA> Jimenez
Date: 11/26/01 7:42AM
Subject: Car Talk VOQ submission

* This data was submitted via a fill-in form at the Cartalk web site
* (<http://www.cartalk.cars.com/Tools/nhtsa.pl>) if you have any problems
* or suggestions regarding the format of this submission, send email
* to webmaster@cartalk.com

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SUBMISSION DATE: Saturday, November 24th 2001 at 1:28:41 PM

VEHICLE OWNER'S QUESTIONNAIRE
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OWNER INFORMATION

NAME: [REDACTED]
ADDRESS: [REDACTED]
F: [REDACTED]
TELEPHONE: [REDACTED]

NHTSA authorized to send a copy of this report to the manufacturer: No

VEHICLE INFORMATION

VIN:
MAKE: Subaru
MODEL: Legacy Outback
YEAR: 97

ODOMETER: 104,000
PURCHASE DATE: 8/29/96
NEW OR USED: New

DEALER NAME: Paul Brother's
ADDRESS: Herndon, VA 20170

ENGINE SIZE: 2.5 L
CYLINDERS: 4

FUEL INJECTION: No
TURBO: No
FUEL TYPE: Gas
ANTILOCK BRAKES: Yes
CRUISE CONTROL: Yes

DRIVETRAIN: 4 Wheel
DRIVER AIRBAG: Yes
PASSENGER AIRBAG: Yes
3-POINT BELT: Yes
MOTOR BELT: No
2-POINT BELT: No
BODY STYLE: Station Wagon

FAILED COMPONENT(S)/PART(S) INFORMATION

COMPONENT: Cracked engine block and head, no signs of overheating

PART NAME(S):

LOCATION:

NUMBER OF FAILURES: 1

DATE(S) OF FAILURES: 11/15/01

MILEAGE AT FAILURE(S): 104,000

SPEED AT FAILURE(S):

MANUFATURER CONTACTED: Yes

NHTSA CONTACTED: No

APPLICABLE ACCIDENT INFORMATION

ACCIDENT: No
FIRE: No

NUMBER OF PERSONS INJURED:
NUMBER OF FATALITIES:
ESTIMATED PROPERTY DAMAGE: \$

DRIVER AIRBAG DEPLOYED:
PASSENGER AIRBAG DEPLOYED:

REPORTED TO POLICE:

INFORMATION ON TIRE FAILURE(S) (IF APPLICABLE)

DOT NUMBER: DOT
TIRE MANUFACTURER:

TIRE NAME:
TIRE SIZE:

ADDITIONAL COMMENTS

The Subaru mechanic can find no mechanical reason why this would occur.

END OF FORM



U.S. Department
of Transportation
**National Highway
Traffic Safety
Administration**

Auto Safety Hotline

Vehicle Owner's Questionnaire

NATIONWIDE 1-800-424-9393
DC METRO AREA (202) 366-0123
INTERNET: <http://www.nhtsa.dot.gov>

FOR AGENCY USE ONLY 1058

Date Received

26-NOV-2001

Ord or _____
rt_dt _____
pd_rt _____
rp_lr _____

Reference No.

785796

Do you authorize NHTSA to provide a copy of report to the manufacturer of your vehicle? YES NO
In the absence of an authorization, NHTSA WILL NOT provide your name and address to the vehicle manufacturer.

Signature of Owner _____ Date ____/____/____

VEHICLE INFORMATION

Vehicle Ident. No. (VIN) <small>(Locate at bottom of windshield or driver's side)</small>	Vehicle Make	Vehicle Model	Vehicle Year	Current Odometer Reading
	SUBARU TRUCK	OUTBACK	1997	

Purchase Date 29-AUG-1996	Dealer's Name _____	Engine Size (CID/CC/L) 4 CYL	<input type="checkbox"/> Turbo <input type="checkbox"/> Diesel <input type="checkbox"/> Gas <input type="checkbox"/> Fuel Injectio
<input checked="" type="checkbox"/> New <input type="checkbox"/> Used	City _____ State _____ Zip Code _____	No Cylinders _____	

Transmission Type <input type="checkbox"/> Manual <input type="checkbox"/> Automatic	Antilock Brakes <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Restraint System <input checked="" type="checkbox"/> 3-Point Belt <input type="checkbox"/> Motorbelt <input type="checkbox"/> Driverside Airbag <input type="checkbox"/> 2-Point Bel <input type="checkbox"/> Passengerside Airbag	Cruise Control <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Drive Train <input type="checkbox"/> Front <input type="checkbox"/> Rear <input checked="" type="checkbox"/> 4-Wheel	Vehicle Type <input type="checkbox"/> Car <input type="checkbox"/> Sport Util <input type="checkbox"/> Van <input type="checkbox"/> Truck <input type="checkbox"/> Minivan <input type="checkbox"/> Motorcycle <input type="checkbox"/> Other _____	Body Style <input type="checkbox"/> 2-Door <input type="checkbox"/> 4-Door <input checked="" type="checkbox"/> Stationwagon <input type="checkbox"/> Pick Up Truck <input type="checkbox"/> Other _____
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FAILED COMPONENT(S)/PART(S) INFORMATION

Component 05150000	Part Name(s) ENGINE:OTHER PARTS	Location <input type="checkbox"/> Left <input type="checkbox"/> Right <input type="checkbox"/> Front <input type="checkbox"/> Rear	Failed Part's <input type="checkbox"/> Original <input type="checkbox"/> Replacement
No of Failure 1	Date(s) of Failure(s) 15-NOV-2001	Failed Part(s) <input type="checkbox"/> Yes <input type="checkbox"/> No	NHTSA Previously <input type="checkbox"/> Yes <input type="checkbox"/> No
	Mileage at Failure(s) 104000		
	Vehicle Speed at Failure(s)		

APPLICATION INCIDENT INFORMATION

(Please describe in detail the incident(s), Failure(s), Crash(es), and injury(ies) on the back of this form)

Crash <input type="checkbox"/> Yes <input type="checkbox"/> No	Fire <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Number of Persons Injured	Number of Fatalities	Estimated Property Damag	Reported to Police <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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NARRATIVE DESCRIPTION OF FAILURE(S), INCIDENT(S), INJURY(IES)

CONSUMER STATES THAT ENGINE BLOCK AND HEAD ARE CRACKED WITH NO SIGNS OF OVERHEATING, SUBARU MECHANIC COULD NOT FIND NO MECHANICAL REASON WHY THIS OCCURRED. MANUFACTURER WAS CONTACTED. ^TT

COPIES OF THIS FORM ARE:

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.