Form Approved: OMB No. 2127-0042

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 336

Date Received: 06-JUN-2002

Od_or ____ ____
rt_dt ____ ____
od_rt ____ ____
np_ltr ____ ____

Reference No.: 8011242

[redacted]

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.) (Locate at bottom of windshield on driver's side)	Vehicle Make	Vehicle Model	Vehicle Year	Current Odometer Readin
JF1AX4327KB307053	SUBARU	XT	1989	

Purchase Dat
☐ New ☒ Used

Dealer's Name_____
City_____ State_____ Zip Code_____

Engine Size (CID/CC/L _____
No Cylinders _____

☐ Turbo
☐ Diesel
☐ Gas
☐ Fuel Injectio

Transmission Type	Antilock Brakes	Restraint System	Cruise Contro	Drive Trai	Vehicle Type	Body Style
☐ Manual ☐ Automatic	☐ Yes ☐ No	☐ 3-Point Belt ☐ Motorbelt ☐ Driverside Airbag ☐ 2-Point Bel ☐ Passengerside Airbag	☐ Yes ☐ No	☐ Front ☐ Rear ☐ 4-Wheel	☐ Car ☐ Sport Utl ☐ Van ☐ Truck ☐ Minivan ☐ Motorcycle ☐ Other_____	☐ 2-Door ☐ 4-Door ☐ Stationwagon ☐ Pick Up Truck ☐ Other_____

FAILED COMPONENT(S)/PART(S) INFORMATION

Component	Part Name(s	Location	Failed Part(s
05150022	ENGINE:GASKETS:OIL PAN	☐ Left ☐ Right ☐ Front ☐ Rear	☐ Original ☐ Replacement

No of Failure	Dates of Failure(s) 01-OCT-1990 Mileage at Failure(s 500 Vehicle Speed at Failure(s)	Failed Part(s)	NHTSA Previously
		☐ Yes ☐ No	☐ Yes ☐ No

APPLICATION INCIDENT INFORMATION

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

Crash	Fire	Number of Persons Injured	Number of Fatalitie	Estimated Property Damag	Reported to Polic
☐ Yes ☐ No	☐ Yes ☐ No				☐ Yes ☐ No

NARRATIVE DESCRIPTION OF FAILURE(S), INCIDENT(S), INJURY(IES)

THERE IS OIL LEAKING SLOWING FROM THE DRAIN PLUG AREA. NO MATTER HOW TIGHT CONSUMER TIGHTENS IT THERE'S STILL A SLOW LEAK. CONSUMER FEELS THIS MAY CAUSE A FIRE. PLEASE PROVIDE ANY FURTHER INFOMATION.*AK

CONTINUED ON REVERSE

Form Approved: O.M.B. No. 2127-0009

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

Vehicle Owner's Questionnaire (VOQ)

DOT Auto Safety Hotline
NATIONWIDE 1-888-DASH-2-DOT
1-888-327-4236
www.nhtsa.dot.gov/hotline

FOR AGENCY USE ONLY 335

Date Received: 06-JUN-2002
OFFICE OF DEFECTS INVESTIGATION

Qd_or
rt_dt
od_rt
up_ltr

Reference No. 8011242

OWNER INFORMATION (Type or Print)

[redacted] [redacted] 757755
ELKHART IN [redacted]

Work Number [redacted]
Home Number SAME

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 [redacted] Date 6/18/02

Vehicle Ident. No. (VIN) (Located at bottom of windshield on driver's side)	Vehicle Make	Vehicle Model	Vehicle Year	Current Odometer Reading
JF1AX4327KB307053	SUBARU	XT	1989	39,890

Purchase Date: 10-5-89 ☑ New ☐ Used
Dealer's Name: HOLTZ MOTOR CAR INC.
City: ROCHESTER State: NY Zip Code: 14623
Engine Size (CID/CC/L): 1800cc No Cylinders: 4
☐ Turbo ☐ Diesel ☐ Gas ☑ Fuel Injection

Transmission Type	Antilock Brakes	Restraint System	Cruise Control	Drive Trai	Vehicle Type	Body Style
☑ Manual ☐ Automatic	☐ Yes ☑ No	☐ 3-Point Belt ☐ Motorbelt ☐ Driverside Airbag ☑ 2-Point Bel ☐ Passengerside Airbag	☐ Yes ☑ No	☑ Front ☐ Rear ☐ 4-Wheel	☑ Car ☐ Sport Ut ☐ Van ☐ Truck ☐ Minivan ☐ Motorcycle ☐ Other	☑ 2-Door ☐ 4-Door ☐ Stationwagon ☐ Pick Up ☐ Truck

FAILED COMPONENT(S)/PART(S) INFORMATION

Component	Part Name(s)	Location	Failed Part(s)
05150022	ENGINE:GASKETS:OIL PAN	☐ Left ☐ Right ☑ Front ☐ Rear	☑ Original ☐ Replacement

No of Failures	Date(s) of Failure(s)	Mileage at Failure(s)	Vehicle Speed at Failure(s)	Failed Part(s)	NHTSA Previously
FROM NEW — CONTINUES	01-OCT-1990	500	STARTING	☑ Yes ☐ No	☐ Yes ☑ No

APPLICATION INCIDENT INFORMATION

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

Crash	Fire	Number of Persons Injured	Number of Fatalities	Estimated Property Damage	Reported to Police
☐ Yes ☑ No	☐ Yes ☑ No	NOT YET 0	0	$200-	☐ Yes ☑ No

NARRATIVE DESCRIPTION OF FAILURE(S), INCIDENT(S), INJURY(IES)

THERE IS OIL LEAKING SLOWING FROM THE DRAIN PLUG AREA. NO MATTER HOW TIGHT CONSUMER TIGHTENS IT THERE'S STILL A SLOW LEAK. CONSUMER FEELS THIS MAY CAUSE A FIRE. PLEASE PROVIDE ANY FURTHER INFOMATION.*AK

CONTINUE ON BACK IF NEEDED