

U.S. Department
of TransportationNational Highway
Traffic Safety
Administration

DOT Auto Safety Hotline

Vehicle Owner's Questionnaire (VOQ)

NATIONWIDE 1-888-DASH-2-DOT

1-888-327-4236

www.nhtsa.dot.gov/hotline

FOR AGENCY USE ONLY 255

Date Received

08-NOV-2000

 Od_or _____
 Rt_dt _____
 od_rt _____
 up_ltr _____

Reference No.

874633

 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) _____ (located at front of windshield on driver's side)	Vehicle Make SUBARU	Vehicle Model DL	Vehicle Year 1988	Current Odometer Reading
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Purchase Date	Dealer's Name _____	Engine Size (CID/CC/L) _____	☐ Turbo ☐ Diesel ☐ Gas ☐ Fuel Injection
☐ New ☒ Used	City _____ State _____ Zip Code _____	No Cylinders _____	

Transmission Type ☐ Manual ☐ Automatic	Antilock Brakes ☒ Yes ☐ No	Restraint System ☐ 3-Point Belt ☐ Motorbell ☐ Driverside Airbag ☐ 2-Point Belt ☐ Passengerside Airbag	Cruise Control ☐ Yes ☒ No	Drive Train ☐ Front ☐ Rear ☐ 4-Wheel	Vehicle Type ☐ Car ☐ Sport Ult ☐ Van ☐ Truck ☐ Minivan ☐ Motorcycle ☐ Other _____	Body Style ☐ 2-Door ☐ 4-Door ☐ Stationwagon ☐ Pick Up Truck ☐ Other _____
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FAILED COMPONENT(S)/PART(S) INFORMATION

Component 06420000	Part Name(s) FUEL:THROTTLE LINKAGES:ACCELERATOR:RIGID	Location ☐ Left ☐ Right ☐ Front ☐ Rear	Failed Part(s) ☐ Original ☐ Replacement
No of Failures	Date(s) of Failure(s) _____ Mileage at Failure(s) _____ Vehicle Speed at Failure(s) _____	Failed Part(s) Available? ☐ Yes ☐ No	NHTSA Previously Contacted? ☐ 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 ☒ Yes ☐ No	Fire ☐ Yes ☒ No	Number of Persons Injured 1	Number of Fatalities	Estimated Property Damage	Reported to Police ☐ Yes ☒ No
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NARRATIVE DESCRIPTION OF FAILURE(S), INCIDENT(S), INJURY(IES)

WHILE DRIVING ACCELERATOR SUDDENLY GOT STUCK IN OPEN POSITION, CAUSING VEHICLE TO ACCELERATE OUT OF CONTROL, AND STRUCK TWO OTHER VEHICLES. DEALER HAS NOT BEEN CONTACTED.*AK

CONTINUED ON BACK (REVERSE)

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.

DOT Auto Safety Hotline Vehicle Owner's Questionnaire (VOQ) U.S. Department of Transportation National Highway Traffic Safety Administration NATIONWIDE 1-888-DASH-2-DOT 1-888-327-4236 www.nhtsa.dot.gov/hotline		FOR AGENCY USE ONLY 255 Date Received <u>NOV-5 PM 3:38</u> <u>08-NOV-2000</u> OFFICE CTS INVESTIGATION	
OWNER INFORMATION (Type or Print) 654412		Reference No. 874633 Work Number Home Number	
Do you authorize NHTSA to provide a copy of report to the manufacturer of your vehicle? ☒ YES ☐ NO In the absence of an your name and address to the vehicle manufacturer. Signature of Owner Date <u>11/22/2000</u>			
VEHICLE INFORMATION			
Vehicle Ident. No. (VIN) (Located at bottom of windshield on driver's side) <u>JF1AC42B8JC204925</u>		Vehicle Make <u>SUBARU</u>	Vehicle Model <u>DL</u>
Vehicle Year <u>1988</u>		Current Odometer Reading <u>100,419</u>	
Purchase Date <u>5/25/91</u> ☐ New ☒ Used	Dealer's Name <u>BROWN PONTIAC-SUBARU</u> City <u>ARLINGTON</u> State <u>VA</u> Zip Code <u>22204</u>		Engine Size (CID/CC/L) _____ No Cylinders _____ ☐ Turbo ☐ Diesel ☒ Gas ☒ Fuel Injection
Transmission Type ☐ Manual ☒ Automatic	Antilock Brakes ☒ Yes ☒ No	Restraint System ☒ 3-Point Belt ☐ Motorbelt ☐ Driverside Airbag ☐ 2-Point Belt ☐ Passengerside Airbag	Cruise Control ☐ Yes ☒ No
Drive Train ☒ Front ☐ Rear ☐ 4-Wheel	Vehicle Type ☒ Car ☐ Van ☐ Minivan ☐ Other _____	Sport Utility ☐ Truck ☐ Motorcycle	Body Style ☐ 2-Door ☒ 4-Door ☐ Stationwagon ☐ Pick Up Truck ☐ Other _____
FAILED COMPONENT(S)/PART(S) INFORMATION			
Component <u>06420000</u>	Part Name(s) <u>FUEL THROTTLE LINKAGES ACCELERATOR RIGID</u>		Location ☐ Left ☐ Front ☐ Right ☐ Rear
Failed Part(s) ☐ Original ☐ Replacement		No of Failures _____ Date(s) of Failure(s) _____ Mileage at Failure(s) _____ Vehicle Speed at Failure(s) _____	
Failed Part(s) Available? ☐ Yes ☐ No		NHTSA Previously Contacted? ☐ 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 ☒ Yes ☐ No	Fire ☐ Yes ☒ No	Number of Persons Injured <u>1</u>	Number of Fatalities <u>0</u>
Estimated Property Damage <u>0</u>		Reported to Police ☒ Yes ☐ No	
NARRATIVE DESCRIPTION OF FAILURE(S), INCIDENT(S), INJURY(IES)			
WHILE DRIVING ACCELERATOR SUDDENLY GOT STUCK IN OPEN POSITION, CAUSING VEHICLE TO ACCELERATE OUT OF CONTROL, AND STRUCK TWO OTHER VEHICLES. DEALER HAS NOT BEEN CONTACTED. AK WHEN EXITING THE A PARKING GARAGE, THE DRIVER PRESSED THE ACCELERATOR AND HEARD THE ENGINE REVING HIGH. SHE APPLIED THE BRAKES BUT THE ACCELERATOR STUCK IN THE OPEN POSITION CAUSING THE VEHICLE TO CONTINUE FORWARD OUT OF CONTROL STRUCKING A PEDESTRIAN AND TWO OTHER VEHICLES.			
CONTINUE ON BACK IF NEEDED			
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.			