



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

04-MAY-2001

Od\_or \_\_\_\_\_  
rt\_dt \_\_\_\_\_  
od\_rt \_\_\_\_\_  
ip\_lr \_\_\_\_\_

Reference No.

887459

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)<br><small>(Location at bottom of<br/>windshield and driver's side<br/>door)</small> |                                                                        | Vehicle Make                                                                                                                         | Vehicle Model                                                          | Vehicle Year                                                                                                                                 | Current Odometer Reading                                                                                                                                                                      |
| 4S3BH686X17634681                                                                                            |                                                                        | SUBARU                                                                                                                               | OUTBACK                                                                | 2001                                                                                                                                         |                                                                                                                                                                                               |
| Purchase Date                                                                                                | Dealer's Name _____                                                    |                                                                                                                                      | Engine Size<br>(CID/CC/L _____)                                        | <input type="checkbox"/> Turbo<br><input type="checkbox"/> Diesel<br><input type="checkbox"/> Gas<br><input type="checkbox"/> Fuel Injection |                                                                                                                                                                                               |
| <input type="checkbox"/> New <input checked="" type="checkbox"/> Used                                        | City _____ State _____ Zip Code _____                                  |                                                                                                                                      | No Cylinders _____                                                     |                                                                                                                                              |                                                                                                                                                                                               |
| Transmission Type                                                                                            | Antilock Brakes                                                        | Restraint System                                                                                                                     | Cruise Control                                                         | Drive Train                                                                                                                                  | Vehicle Type                                                                                                                                                                                  |
| <input type="checkbox"/> Manual<br><input type="checkbox"/> Automatic                                        | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No | <input type="checkbox"/> 3-Point Belt<br><input type="checkbox"/> Driverside Airbag<br><input type="checkbox"/> Passengerside Airbag | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No | <input type="checkbox"/> Front<br><input type="checkbox"/> Rear<br><input type="checkbox"/> 4-Wheel                                          | <input type="checkbox"/> Car<br><input type="checkbox"/> Van<br><input type="checkbox"/> Minivan<br><input type="checkbox"/> Other _____                                                      |
|                                                                                                              |                                                                        | <input type="checkbox"/> Motorbelt<br><input type="checkbox"/> 2-Point Bel                                                           |                                                                        |                                                                                                                                              | <input type="checkbox"/> Sport Utl<br><input type="checkbox"/> Truck<br><input type="checkbox"/> Motorcycle<br><input type="checkbox"/> Other _____                                           |
|                                                                                                              |                                                                        |                                                                                                                                      |                                                                        |                                                                                                                                              | Body Style                                                                                                                                                                                    |
|                                                                                                              |                                                                        |                                                                                                                                      |                                                                        |                                                                                                                                              | <input type="checkbox"/> 2-Door<br><input type="checkbox"/> 4-Door<br><input type="checkbox"/> Stationwagon<br><input type="checkbox"/> Pick Up Truck<br><input type="checkbox"/> Other _____ |

### FAILED COMPONENT(S)/PART(S) INFORMATION

|                       |                                                                            |                                                                                                                                          |                                                                                             |
|-----------------------|----------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------|
| Component<br>06410000 | Part Name(s)<br>FUEL THROTTLE LINKAGES AND CONTROL PEDAL                   | Location<br><input type="checkbox"/> Left <input type="checkbox"/> Right<br><input type="checkbox"/> Front <input type="checkbox"/> Rear | Failed Part(s)<br><input type="checkbox"/> Original<br><input type="checkbox"/> Replacement |
| No of Failure<br>0    | Date(s) of Failure(s)<br>02-MAY-2001<br>3500<br>Mileage at Failure(s)<br>0 | Failed Part(s)<br><input type="checkbox"/> Yes <input type="checkbox"/> No                                                               | NHTSA Previously<br><input type="checkbox"/> Yes <input type="checkbox"/> 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<br><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No | Fire<br><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | Number of Persons Injured<br>0 | Number of Fatalities<br>0 | Estimated Property Damag<br>0 | Reported to Police<br><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |
|------------------------------------------------------------------------------|-----------------------------------------------------------------------------|--------------------------------|---------------------------|-------------------------------|-------------------------------------------------------------------------------------------|

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

WHILE PARKING BEHIND ANOTHER VEHICLE CONSUMER PUT FOOT ON BRAKE PEDAL AND ACCELERATOR AT SAME TIME. CONSUMER ACCELERATED INTO REAR OF SOMEONE'S CAR. CONSUMER FELT THERE WAS A MANUFACTURER'S DEFECT IN THESE PEDALS.\*AK

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.

| DOT Auto Safety Hotline                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                                                                                                                                                                                                     | FOR AGENCY USE ONLY 335                                                                                                                                                                                                                                            |                                                                                                                                                                                                                             |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
|  <p>U.S. Department of Transportation<br/>National Highway Traffic Safety Administration</p>                                                                                                                                                                                                                                                                                                                                                                                                              |                                                                                                                                                                                                                     | <p><b>Vehicle Owner's Questionnaire (VOQ)</b></p> <p>NATIONWIDE 1-888-DASH-2-DOT<br/>1-888-327-4236<br/>www.nhtsa.dot.gov/hotline</p>                                                                                                                              |                                                                                                                                                                                                                             |
| <p>OWNER INFORMATION (Type or Print)</p> <p>690122</p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                                                                                                                                                                                                     | <p>Date Received<br/>04-MAY-2001</p> <p>Reference No.<br/>887459</p>                                                                                                                                                                                               |                                                                                                                                                                                                                             |
| <p>Do you authorize NHTSA to provide a copy of report to the manufacturer of your vehicle?<br/>In the absence of a signature, please print name and address to the vehicle manufacturer.</p> <p>Signature of Owner: _____ Date 5/25/01</p>                                                                                                                                                                                                                                                                                                                                                 |                                                                                                                                                                                                                     | <p>Work Num _____<br/>Home Num _____</p>                                                                                                                                                                                                                           |                                                                                                                                                                                                                             |
| <p><b>VEHICLE INFORMATION</b></p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                                                                                                                                                                                                                     |                                                                                                                                                                                                                                                                    |                                                                                                                                                                                                                             |
| Vehicle Ident. No. (VIN) (If located at bottom of windshield use driver's door)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | Vehicle Make                                                                                                                                                                                                        | Vehicle Model                                                                                                                                                                                                                                                      | Vehicle Year                                                                                                                                                                                                                |
| 4S3BH686X17634681                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | SUBARU                                                                                                                                                                                                              | OUTBACK                                                                                                                                                                                                                                                            | 2001                                                                                                                                                                                                                        |
| Current Odometer Reading                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | 5800                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                    |                                                                                                                                                                                                                             |
| Purchase Date<br>2/2/01                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | Dealer's Name DONALDSONS INC                                                                                                                                                                                        |                                                                                                                                                                                                                                                                    | Engine Size (CID/CC/L) 2.5                                                                                                                                                                                                  |
| <input type="checkbox"/> New <input checked="" type="checkbox"/> Used                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | City SAYVILLE State NY Zip Code 11782                                                                                                                                                                               | No Cylinders 4                                                                                                                                                                                                                                                     | <input type="checkbox"/> Turbo<br><input type="checkbox"/> Diesel<br><input checked="" type="checkbox"/> Gas<br><input checked="" type="checkbox"/> Fuel Injection                                                          |
| Transmission Type<br><input type="checkbox"/> Manual <input checked="" type="checkbox"/> Automatic                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | Antilock Brakes<br><input checked="" type="checkbox"/> Yes <input checked="" type="checkbox"/> No                                                                                                                   | Restraint System<br><input checked="" type="checkbox"/> 3-Point Belt <input type="checkbox"/> Motorbelt<br><input checked="" type="checkbox"/> Driverside Airbag <input type="checkbox"/> 2-Point Belt<br><input checked="" type="checkbox"/> Passengerside Airbag | Cruise Control <input checked="" type="checkbox"/> Yes <input checked="" type="checkbox"/> No<br>Drive Train<br><input type="checkbox"/> Front <input type="checkbox"/> Rear<br><input checked="" type="checkbox"/> 4-Wheel |
| Vehicle Type<br><input checked="" type="checkbox"/> Car <input type="checkbox"/> Sport Utility <input type="checkbox"/> Truck <input type="checkbox"/> Motorcycle<br><input type="checkbox"/> Van <input type="checkbox"/> Minivan <input type="checkbox"/> Other<br>WAGON                                                                                                                                                                                                                                                                                                                 | Body Style<br><input type="checkbox"/> 2-Door <input checked="" type="checkbox"/> 4-Door<br><input type="checkbox"/> Stationwagon <input type="checkbox"/> Pick Up Truck<br><input type="checkbox"/> Other<br>WAGON |                                                                                                                                                                                                                                                                    |                                                                                                                                                                                                                             |
| <p><b>FAILED COMPONENT(S)/PART(S) INFORMATION</b></p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                                                                                                                                                                                                     |                                                                                                                                                                                                                                                                    |                                                                                                                                                                                                                             |
| Component<br>06410000                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | Part Name(s)<br>FUEL-THROTTLE LINKAGES AND CONTROL-PEDAL                                                                                                                                                            | Location<br><input type="checkbox"/> Left <input type="checkbox"/> Right<br><input type="checkbox"/> Front <input type="checkbox"/> Rear                                                                                                                           | Failed Part(s)<br><input checked="" type="checkbox"/> Original <input type="checkbox"/> Replacement                                                                                                                         |
| No of Failures<br>BRAKE                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | Date(s) of Failure(s) 02-MAY-2001 4/29/2001<br>Mileage at Failure(s) 3500<br>Vehicle Speed at Failure(s) 0                                                                                                          | Failed Part(s) Available?<br><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No                                                                                                                                                                   | NHTSA Previously Contacted?<br><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No                                                                                                                          |
| <p><b>APPLICATION INCIDENT INFORMATION</b><br/>(Please describe in detail the incident(s), Failure(s), Crash(es), and injury(ies) on the back of this form.)</p>                                                                                                                                                                                                                                                                                                                                                                                                                           |                                                                                                                                                                                                                     |                                                                                                                                                                                                                                                                    |                                                                                                                                                                                                                             |
| Crash<br><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | Fire<br><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No                                                                                                                                         | Number of Persons Injured<br>0                                                                                                                                                                                                                                     | Number of Fatalities<br>0<br>Estimated Property Damage<br>\$ 2-400                                                                                                                                                          |
| Reported to Police<br><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                                                                                                                                                                     |                                                                                                                                                                                                                                                                    |                                                                                                                                                                                                                             |
| <p><b>NARRATIVE DESCRIPTION OF FAILURE(S), INCIDENT(S), INJURY(IES)</b></p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                     |                                                                                                                                                                                                                                                                    |                                                                                                                                                                                                                             |
| <p>ON LINE</p> <p>WHILE PARKING BEHIND ANOTHER VEHICLE CONSUMER PUT FOOT ON BRAKE PEDAL AND ACCELERATOR AT SAME TIME. CONSUMER ACCELERATED INTO REAR OF SOMEONE'S CAR. CONSUMER FELT THERE WAS A MANUFACTURER'S DEFECT IN THESE PEDALS.*AK</p> <p>BRAKE PEDAL BELOW ACCELERATOR WHEN BRAKING IN A LINE OF CARS - FACILITATING DRIVER TO ACCELERATE WHILE BRAKING</p> <p>NHTSA SHOULD INVESTIGATE FURTHER!</p>                                                                                                                                                                              |                                                                                                                                                                                                                     |                                                                                                                                                                                                                                                                    |                                                                                                                                                                                                                             |
| <p>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.</p> |                                                                                                                                                                                                                     |                                                                                                                                                                                                                                                                    |                                                                                                                                                                                                                             |

Design Defect