



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

Auto Safety Hotline

Vehicle Owner's Questionnaire

NATIONWIDE 1-800-424-8393

DC METRO AREA (202) 366-0123

INTERNET: <http://www.nhtsa.dot.gov>

Use a No. 2 pencil or a blue or black ink pen only.

CORRECT MARK: ●

Form Approved: O.M.B. No. 2127-0303

FOR AGENCY USE ONLY

Date Received

7/11/01

Reference No.

Office

Field

District

Supervisor

OWNER INFORMATION (Type or Print)

DAYTIME TELEPHONE NUMBER

VEHICLE INFORMATION

VEHICLE IDENT. NO. (VIN) (Located at bottom of windshield on driver's side)										VEHICLE MAKE										VEHICLE MODEL										MANUFACTURE DATE										MODEL YEAR																													
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VEHICLE MANUFACTURER										☐ BMW ☐ Ford ☐ Honda ☐ Nissan ☒ Subaru ☐ Volvo ☐ Other ☐ DaimlerChrysler ☐ General Motors ☐ Hyundai ☐ Saab ☐ Toyota ☐ VW																																																											
PURCHASE DATE										DEALER'S NAME										CITY										STATE										ZIP CODE																													
12 JAN 01										N/A										Hill										HI										96749-4583																													
ENGINE SIZE										FUEL SYSTEM										FUEL TYPE										TRANSMISSION TYPE										ANTILOCK BRAKES										RESTRAINT SYSTEM										CRUISE CONTROL									
1.2L										☒ Turbo ☐ Fuel Injection										☐ Diesel ☒ Gas										☐ Manual ☒ Automatic										☐ Yes ☒ No										☐ Driverside Airbag ☐ 2-Point Belt ☐ Passenger Airbag ☐ Mirrorcell ☒ 3-Point Belt										☐ Yes ☒ No									
NO. CYLINDERS										3																																																											
DRIVETRAIN										VEHICLE TYPE										DOORS										BODY STYLE																																							
☒ Front ☐ 4-Wheel ☐ Rear										☒ Car ☐ Minivan ☐ Truck ☐ Other										☒ 2 Door ☐ 4 Door										☒ Hatchback ☐ Pick Up Truck ☐ Sedan ☐ Stationwagon																																							

FAILED COMPONENT(S)/PART(S) INFORMATION

COMPONENT										NO. OF FAILURES										To report defective or failed tires provide the following: Tire Brand, Tire Name, Tire Size (include all number and letters).																																							
☐ Child Seat ☐ Electric Lights & Alarms ☐ Engine & Cooling System ☐ Equipment ☐ Fuel System, Exhaust ☐ Heater, Defrost, Ventilation ☐ Interior ☐ Parking Brake ☐ Power Train ☐ Service Brakes ☐ Steering ☐ Structure ☐ Suspension ☐ Visual Systems ☐ Other <u>SEAT BELT</u>										1 1 1 2 3 4 5 6 7 8 9 1 1 2 3 4 5 6 7 8 9																																																	
INCIDENT DATE										MILEAGE AT INCIDENT										TIRE NAME										COMPLETE TIRE SIZE																													
										71,000																																																	
VEHICLE SPEED AT INCIDENT										TIRE BRAND																																																	
																				☐ BF Goodrich ☐ Cooper ☐ Firestone ☐ Goodyear ☐ Kelly Springfield ☐ Michelin ☐ Yokohama ☐ Other																																							
FAILED PART(S)										NHTSA PREVIOUSLY CONTACTED?																																																	
☒ Originals ☐ Replacement										☒ Yes ☐ No																																																	
HANDICAPPED ADAPTIVE										FAILED PART(S) AVAILABLE?																																																	
☐ Yes ☐ No										☐ Yes ☐ No																																																	

APPLICABLE INCIDENT INFORMATION

Please describe in detail the incident(s), failure(s), crash(es), and injury(ies) on the back of this form.										CRASH										NUMBER OF PERSONS INJURED										CAUSE OF INCIDENT										RESULT OF INCIDENT									
										☐ Yes ☒ No										☒ 1 1 2 3 4 5 6 7 8 9 ☐ 1 1 2 3 4 5 6 7 8 9										☐ Wear/Corroded/Rust ☐ Weak/Poor Fit/Loose ☐ Out/Torn ☐ Disconnected/Fall Off ☐ Erratic/Poor Performance ☐ Excessive Effort ☐ Noisy ☐ Leaks ☐ Short ☐ Loose/Sticks/Grabs ☐ Stability/Vibration ☒ Broken										☐ Explosion/Fire ☐ Loss of Control ☐ Poor Visibility ☐ Inadvertent Start ☐ Rollover ☐ Stale ☐ Sudden Acceleration									
										FIRE										NUMBER OF FATALITIES																													
										☐ Yes ☒ No										☒ 1 1 2 3 4 5 6 7 8 9 ☐ 1 1 2 3 4 5 6 7 8 9																													

PLEASE DO NOT WRITE IN THIS AREA

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F10000074

Narrative description of incident(s), failure(s), crash(es), location(s), and injury(ies). Include additional accidents if applicable.

Driver seat belt
does not retract.
Fails to lock.
Does not work!

Continue on additional page if necessary.

Describe any additional incidents. (Include date and mileage)

The Privacy Act of 1974—Public Law 93-570 This information is requested pursuant to authority vested in the National Highway Traffic Safety Administration. You are under no obligation to respond to this questionnaire. Your responses may be used to assist the NHTSA in determining whether a manufacturer should take appropriate action to correct a safety defect. If the NHTSA perceives 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.

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NO POSTAGE
NECESSARY
IF MAILED
IN THE
UNITED STATES



BUSINESS REPLY MAIL
FIRST-CLASS MAIL PERMIT NO. 73173 WASHINGTON, D.C.

POSTAGE WILL BE PAID BY NATL. HWY. TRAFFIC SAFETY ADMIN.

U.S. Department of Transportation
National Highway Traffic Safety Administration
Office of Defects Investigation, NSA-10.01
400 7th Street, SW
Washington, DC 20590

Complete and return or place in your car manual for future use



VEHICLE OWNER'S QUESTIONNAIRE (V00Q)

DOT AUTO SAFETY HOTLINE

TO REPORT VEHICLE SAFETY DEFECTS
COMPLETE THIS FORM
OR

DASH 2 DOT

and dial toll free at

1-888-DASH-2-DOT

1-888-327-4236

DOT Auto Safety Hotline
(DASH) 2 DOT



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Administration

www.nhtsa.dot.gov/hotline