Ford Motor Company

Automotive Safety Office
Environmental and Safety Engineering

September 2, 2004

Mr. Scott Yon
Office of Defects Investigation Safety Assurance
National Highway Traffic Safety Administration
400 Seventh Street, S.W.
Washington, D.C. 20590

Dear Mr. Yon:

Subject: EA04-006:NVS-213dsy - NHTSA Request for Clarification of Question 15, Parts "e" and "f"

The attached revision to the Ford Motor Company June 29, 2004 response to EA04-006 is being submitted in response to an August 23, 2004 telephone request by the agency for clarification of our answers to Request 15, parts "e" and "f". Based on the agency's request we have expanded upon the previous answers provided to parts "e" and "f". Only those portions of the June 29 response that have changed are submitted herein. All other sections of Request 15 remain unchanged.

Should you have any questions, please contact me.

Sincerely,

R. A. Nevi

R. A. Nevi
Assistant Director
Global Automotive Safety Compliance

Attachment

Request 15

For the MY 2001 through 2003 7.3L equipped subject vehicles, describe in detail, and from an engineering and technical point of view, the diagnostic and fault detection routines used to monitor the operation and functionality of the AP sensor, and that are used to set AP sensor related diagnostic fault codes in diagnostic memory (including but not limited to codes P0220 and P0221). Produce a list of the diagnostic fault codes which are related to or involve the AP, and for each such code:

e. State whether normal ETC functionality can be re-established in the event the diagnostic routine determines the fault is no longer present;

f. State the specific sequence of events that must be undertaken by the vehicle operator to re-establish normal ETC functionality in the event the diagnostic routine determines the fault is no longer present;

Answer

Ford originally responded to EA04-006 as follows: There are four diagnostic fault codes associated with the 2001 through 2003 7.3L ETC accelerator pedal: P0122, P0123, P0220, and P0221. The codes, their relationship to the pedal, and the detection and diagnostic routines are discussed in Ford's responses to "a" through "j" below: (This introduction remains unchanged.)

e. Ford originally responded to EA04-006 as follows: Normal functionality is returned if the fault counters return to zero and an acceptable IVS transition is established. Generally, releasing the pedal to the idle position and depressing again creates an idle transition.

Ford's amended response is as follows: For a P0220 and P0221 fault, normal functionality is returned if the fault is no longer present (fault counters at zero) and an acceptable IVS transition is established. Generally, releasing the pedal to the idle position and depressing again creates an idle transition. For a P0122 or P0123 fault, normal functionality is returned if the fault is no longer present (fault counters at zero). A subsequent IVS transition is not required.

f. Ford originally responded to EA04-006 as follows: If the PCM determines a fault is no longer present (fault counter at zero), the user must release the pedal and depress it again to regain functionality. This is required to validate an acceptable IVS transition before operation is restored.

Ford's amended response is as follows: For a P0220 and P0221 fault, if the PCM determines a fault is no longer present (fault counter at zero), the user must release the pedal to the idle position and depress it again to regain functionality. This is required to validate an acceptable IVS transition before operation is restored. For a P0122 or P0123 fault, if the PCM determines a fault is no longer present (fault counter at zero), a subsequent idle transition is not required. The user must simply return the pedal to a position within the normal operating range and full pedal functionality is restored.

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