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

1200 New Jersey Avenue SE.
Washington, DC 20590

AUG 2 2 2017

CERTIFIED MAIL
RETURN RECEIPT REQUESTED

Mr. Mike Woods
Hickory Springs Manufacturing Company
235 Second Avenue NW
P.O. Box 128
Hickory, NC 28603

NEF-107xt
RQ17-006

Dear Mr. Woods:

This letter is to inform you that the Office of Defects Investigation (ODI) of the National Highway Traffic Safety Administration (NHTSA) has opened a Recall Query (RQ17-006) to investigate claims of Quad Step failures on 2013 through 2016 model year (MY) step assemblies manufactured by Hickory Springs Manufacturing Company (HSM) that may have been outside the scope of recall 15E-013, and to determine if HSM notified end users of the amended population in recall 15E-013 and gather certain information regarding other step assemblies that may have used the defective rivet, as mentioned in related consumer complaints.

The Agency received three (3) Vehicle Owner Questionnaire (VOQ) complaints all related to rivet failures on the subject steps manufactured by HSM. An owner of a 2013 KZRV Durango 1500 which, while exiting his unit, fell to the ground after one rivet broke causing the 3-step assembly to collapse. He contacted ODI and noted the broken rivet was an "08", which he read in HSM's 15E-013 recall was one of the defective rivets. A second complaint involved a 2016 RV that described the owner falling to the ground when a rivet sheared, resulting in injuries. His RV is outside the scope of the HSM recall. The step assemblies in both 2015 and 2016 VOQ's were supplied by Lippert Component Inc. (LCI), an end user of HSM. The third complaint, received from an owner of a 2015 KZRV Durango Gold, had a rivet failure but was informed by the servicing dealer their RV was outside the recall scope. Thor, the parent manufacturer was contacted by NHTSA and was informed that the RV was equipped with a similar set of stairs as those described in recall 15E-013 but were not covered by that recall. Thor was unaware of the recall amendment HSM had submitted to NHTSA that increased the scope of the original recall 15E-103. A copy of each of the reports is enclosed for your review.

Unless otherwise stated in the text, the following definitions apply to these information requests:

- **Subject equipment:** All HSM step assemblies manufactured with the same defective rivets as described in recall 15E-013 and for sale in the United States, including, but not limited to, the District of Columbia, and current U.S. territories and possessions.
- **Subject recall:** NHTSA recall 15E-013.
- **Alleged defect:** Failure of a step assembly in the same or similar manor as described in recall 15E-013 resulting from a rivet failure.
- **End Users**: All distributors, Vehicle OEM's, retailers, dealers and other consumers, companies which HSM sold subject equipment to.
- **HSM:** Hickory Springs Manufacturing Company, all of its past and present officers and employees, whether assigned to its principal offices or any of its field or other locations, including all of its divisions, subsidiaries (whether or not incorporated) and affiliated enterprises and all of their headquarters, regional, zone and other offices and their employees, and all agents, contractors, consultants, attorneys and law firms and other persons engaged directly or indirectly (e.g., employee of a consultant) by or under the control of HSM (including all business units and persons previously referred to), who are or, in or after OCT 18, 2012, were involved in any way with any of the following related to the alleged defect in the subject equipment:

  a. Design, engineering, analysis, modification or production (e.g. quality control);
  b. Testing, assessment or evaluation;
  c. Consideration, or recognition of potential or actual defects, reporting, record-keeping and information management, (e.g., complaints, warranty information, part sales), analysis, claims, or lawsuits; or
  d. Communication to, from or intended for zone representatives, fleets, dealers, or other field locations, including but not limited to people who have the capacity to obtain information from dealers.

- **Document:** "Document(s)" is used in the broadest sense of the word and shall mean all original written, printed, typed, recorded, or graphic matter whatsoever, however produced or reproduced, of every kind, nature, and description, and all non-identical copies of both sides thereof, including, but not limited to, papers, letters, memoranda, correspondence, communications, electronic mail (e-mail) messages (existing in hard copy and/or in electronic storage), faxes, mailgrams, telegrams, cables, telex messages, notes, annotations, working papers, drafts, minutes, records, audio and video recordings, data, databases, other information bases, summaries, charts, tables, graphics, other visual displays, photographs, statements, interviews, opinions, reports, newspaper articles, studies, analyses, evaluations, interpretations, contracts, agreements, jottings, agendas, bulletins, notices, announcements, instructions, blueprints, drawings, as-builts, changes, manuals, publications, work schedules, journals, statistical data, desk, portable and computer calendars, appointment books, diaries, travel reports, lists, tabulations, computer printouts, data processing program libraries, data processing inputs and outputs, microfilms, microfiches, statements for services, resolutions, financial statements, governmental records, business records, personnel records, work orders, pleadings, discovery in any form, affidavits, motions, responses to discovery, all transcripts, administrative filings and all mechanical, magnetic, photographic and electronic records or recordings of any kind, including any storage media associated with computers,

including, but not limited to, information on hard drives, floppy disks, backup tapes, and zip drives, electronic communications, including but not limited to, the Internet and shall include any drafts or revisions pertaining to any of the foregoing, all other things similar to any of the foregoing, however denominated by HSM any other data compilations from which information can be obtained, translated if necessary, into a usable form and any other documents. For purposes of this request, any document which contains any note, comment, addition, deletion, insertion, annotation, or otherwise comprises a non-identical copy of another document shall be treated as a separate document subject to production. In all cases where original and any non-identical copies are not available, "document(s)" also means any identical copies of the original and all non-identical copies thereof. Any document, record, graph, chart, film or photograph originally produced in color must be provided in color. Furnish all documents whether verified by HSM or not. If a document is not in the English language, provide both the original document and an English translation of the document.

- **Other Terms:** To the extent that they are used in these information requests, the terms "claim," "consumer complaint," "fleet," "good will," "make," "model," "model year," "notice," "property damage," "property damage claim," "rollover," "type," "warranty," "warranty adjustment," and "warranty claim," whether used in singular or in plural form, have the same meaning as found in 49 CFR 579.4.

In order for my staff to evaluate the alleged defect, certain information is required. Pursuant to 49 U.S.C. § 30166, please provide numbered responses to the following information requests. Insofar as HSM has previously provided a document to ODI, HSM may produce it again or identify the document, the document submission to ODI in which it was included and the precise location in that submission where the document is located. When documents are produced, the documents shall be produced in an identified, organized manner that corresponds with the organization of this information request letter (including all individual requests and subparts). When documents are produced and the documents would not, standing alone, be self-explanatory, the production of documents shall be supplemented and accompanied by explanation.

Please repeat the applicable request verbatim above each response. After HSM's response to each request, identify the source of the information and indicate the last date the information was gathered.

1. State, by model and model year, the number of subject equipment HSM has manufactured for sale in the United States. Separately, for each subject equipment manufactured to date by HSM, state the following:

   a. Step assembly serial number;
   b. Make;
   c. Model;
   d. Model Year;
   e. Rivet part number and design version;
   f. Date of manufacture;
   g. Date warranty coverage commenced; and
   h. The end users in the United States where the step was originally sold.

Provide this information in Microsoft Access 2010, or a compatible format, entitled "PRODUCTION DATA." A pre-formatted data collection file, which provides further details regarding this submission, will be provided to you.

2. State the number of each of the following, received by HSM, or of which HSM is otherwise aware, which relate to, or may relate to, the alleged defect in all subject equipment:

   a. Complaints from end users;
   b. Reports involving an injury or fatality;
   c. Reports involving a personal injury;
   d. Property damage claims;
   e. Third-party arbitration proceedings where HSM is or was a party to the arbitration; and
   f. Lawsuits, both pending and closed, in which HSM is or was a defendant or codefendant.

   For subparts "a" through "*g,* " state the total number of each item (e.g., consumer complaints, personal injury, etc.) separately. Multiple incidents involving the same step assembly are to be counted separately. Multiple reports of the same incident are also to be counted separately (i.e., a consumer complaint and a personal injury claim involving the same incident in which an injury occurred are to be counted as an injury report, and a consumer complaint).

   In addition, for items "c" through "g," provide a summary description of the alleged problem and causal and contributing factors and HSM's assessment of the problem, with a summary of the significant underlying facts and evidence. For items "f" and "g," identify the parties to the action, as well as the caption, court, docket number, and date on which the complaint or other document initiating the action was filed.

3. Separately, for each item (complaint, report, claim, notice, or matter) within the scope of your response to Request No. 2, state the following information:

   a. HSM's file number or other identifier used;
   b. The category of the item, as identified in Request No. 2 (i.e., consumer complaint, injury claims, etc.);
   c. Step assembly owner or fleet name (and fleet contact person), street address, email address and telephone number;
   d. Step assembly part number;
   e. Step assembly's make, model and model year;
   f. Step assembly's subjected RV' mileage at time of incident;
   g. Incident date;
   h. Report or claim date;
   i. Whether a step collapse is alleged;
   j. Failed step assembly rivet location;
   k. Whether property damage is alleged;
   l. Number of alleged injuries, if any; and
   m. Number of alleged fatalities, if any.

Provide this information in Microsoft Access 2010, or a compatible format, entitled "REQUEST NUMBER TWO DATA." A pre-formatted data collection file, which provides further details regarding this submission, will be provided to you.

4. Produce copies of all documents related to each item within the scope of Request No. 2. Organize the documents separately by category (i.e., consumer complaints, injury claims, etc.) and describe the method HSM used for organizing the documents. Describe in detail the search methods and search criteria used by HSM to identify the items in response to Request No. 2.

5. State, by model and model year, a total count for all of the following categories of claims, collectively, that have been paid by HSM to date that relate to, or may relate to, the alleged defect in the subject equipment: warranty claims; extended warranty claims; claims for good will services that were provided; field, zone, or similar adjustments and reimbursements; and warranty claims or repairs made in accordance with a procedure specified in a technical service bulletin or customer satisfaction campaign.

   Separately, for each such claim, state the following information:

   a. HSM's claim number;
   b. Step assembly owner or fleet name (and fleet contact person), street address, email address and telephone number;
   c. Step assembly serial number;
   d. Repair date;
   e. Repairing dealer's or facility's name, telephone number, city and state or ZIP code;
   f. Labor operation number(s);
   g. Problem code(s);
   h. Diagnostic trouble code(s);
   i. Replacement part number(s) and description(s);
   j. Concern stated by customer;
   k. Cause as stated on the repair order;
   l. Correction as stated on the repair order; and
   m. Additional comments, if any, by dealer/technician relating to claim and/or repair.

   Provide this information in Microsoft Access 2010, or a compatible format, entitled "WARRANTY DATA." A pre-formatted data collection file, which provides further details regarding this submission, will be provided to you.

6. State, by make and model year, the terms of the new step assembly warranty coverage offered by HSM on the subject equipment (i.e., the number of months for which coverage is provided and the step assemblies systems that are covered). Describe any extended warranty coverage option(s) that HSM offered for the subject step assemblies and state by option, model, and model year, the number of step assemblies that are covered under each such extended warranty.

7. For recall 15E-013, furnish the following information:
   a. How HSM determined the scope of the population for recall 15E-013 submitted to NHTSA on Feb 20, 2015;
   b. How and when did HSM notify end users of the first population scope submitted on Feb 20, 2015;
      a. Please provide examples.
   c. How HSM determined the amended scope population submitted to NHTSA on May 19, 2015;
   d. How/When HSM notified the end users of the amended population;
      a. Please provide examples.
   e. How HSM validated the new design rivet in production on February 16, 2014;
   f. Provide end user list for steps incorporating the new rivet design produced on or after February 16, 2014;
   g. Has HSM received any complaints from end users related to the new design that was in production as of February 16, 2014?
   h. Does HSM manufacturer the steps recalled in 15E-013, or were the steps or components used to assemble the steps manufactured by another vendor?
   i. Please state the name and address of any vendor(s) identified in response to the previous question.
   j. Is there other equipment HSM has sold that used the defect rivets identified in recall 15E-013?
   k. Was HSM aware of any complaints on other steps (2-step, 3-step etc.,) besides the Quad step in recall 15E-013 at the time the recall was announced?

8. Produce copies of all service, warranty, and other documents that relate to, or may relate to, the alleged defect in the subject equipment, that HSM has issued to any dealers, regional or zone offices, field offices, fleet purchasers, or other entities. This includes, but is not limited to, bulletins, advisories, informational documents, training documents, or other documents or communications, with the exception of standard shop manuals. Also, include the latest draft copy of any communication that HSM is planning to issue within the next 120 days.

9. Describe all assessments, analyses, tests, test results, studies, surveys, simulations, investigations, inquiries and/or evaluations (collectively, "actions") that relate to, or may relate to, the alleged defect in the subject equipment that have been conducted, are being conducted, are planned, or are being planned by, or for, HSM. For each such action, provide the following information:

   a. Action title or identifier;
   b. The actual or planned start date;
   c. The actual or expected end date;
   d. Brief summary of the subject and objective of the action;
   e. Engineering group(s)/supplier(s) responsible for designing and for conducting the action; and
   f. A brief summary of the findings and/or conclusions resulting from the action.

For each action identified, provide copies of all documents related to the action, regardless of whether the documents are in interim, draft, or final form. Organize the documents chronologically by action.

10. Describe all modifications or changes made by, or on behalf of, HSM in the design, material composition, manufacture, quality control, supply, or installation of the rivets used in the subject equipment, from the start of production to date, which relate to, or may relate to, the alleged defect in the subject equipment. For each such modification or change, provide the following information:
    a. The date or approximate date on which the modification or change was incorporated into step assembly production;
    b. A detailed description of the modification or change;
    c. The reason(s) for the modification or change;
    d. The part number(s) (service and engineering) of the original component;
    e. The part number(s) (service and engineering) of the modified component;
    f. Whether the original unmodified component was withdrawn from production and/or sale, and if so, when;
    g. When the modified component was made available as a service component; and
    h. Whether the modified component can be interchanged with earlier production components.

    Also, provide the above information for any modification or change that HSM is aware of which may be incorporated into step assembly production within the next 120 days.

11. Produce two of each of the following:
    a. Exemplar samples of each design version of the rivets used in the subject equipment;
    b. Field return samples of the rivets used in the subject equipment exhibiting the subject failure mode;
    c. Any kits that have been released, or developed, by HSM for use in service repairs to the subject equipment which relate, or may relate, to the alleged defect.

12. State the number of each of the following that HSM has sold that may be used in the subject equipment by component name, part number (both service and engineering/production), model and model year of the step assembly in which it is used and month/year of sale *(including the cut-off date for sales, if applicable)*:
    a. Any kits that have been released, or developed, by HSM for use in service repairs to the subject component/assembly.

    For each component part number, provide the supplier's name, address, and appropriate point of contact (name, title, and telephone number). Also, identify by make, model and model year, any other step assembles of which HSM is aware that contain the identical component, whether installed in production or in service, and state the applicable dates of production or service usage.

13. Furnish HSM's assessment of the alleged defect in the subject equipment, including:

    a. The causal or contributory factor(s);
    b. The failure mechanism(s);
    c. The failure mode(s);
    d. What warnings, if any, the operator and the other persons both inside and outside the step assembly would have that the alleged defect was occurring or subject component was malfunctioning; and
    e. The reports included with this inquiry.

Legal Authority for This Request

This letter is being sent to HSM pursuant to 49 U.S.C. § 30166, which authorizes NHTSA to conduct any investigation that may be necessary to enforce Chapter 301 of Title 49 and to request reports and the production of things. It constitutes a new request for information.

Civil Penalties

HSM's failure to respond promptly and fully to this letter could subject HSM to civil penalties pursuant to 49 U.S.C. § 30165 or lead to an action for injunctive relief pursuant to 49 U.S.C. § 30163. (Other remedies and sanctions are available as well.) The Vehicle Safety Act, as amended, 49 U.S.C. § 30165(a)(3), provides for civil penalties of up to $21,000 per violation per day, with a maximum of $105,000,000 for a related series of daily violations, for failing or refusing to perform an act required under 49 U.S.C. § 30166. *See* 49 CFR 578.6 (as amended by Fixing America's Surface Transportation Act (the "FAST Act"), Pub. L. 114-94, § 24110(a)(2), 129 Stat. 1312 (Dec. 4, 2015)). This includes failing to respond completely, accurately, and in a timely manner to ODI information requests.

If HSM cannot respond to any specific request or subpart(s) thereof, please state the reason why it is unable to do so. If on the basis of attorney-client, attorney work product, or other privilege, HSM does not submit one or more requested documents or items of information in response to this information request, HSM must provide a privilege log identifying each document or item withheld, and stating the date, subject or title, the name and position of the person(s) from, and the person(s) to whom it was sent, and the name and position of any other recipient (to include all carbon copies or blind carbon copies), the nature of that information or material, and the basis for the claim of privilege and why that privilege applies.

Confidential Business Information

All business confidential information must be submitted directly to the Office of Chief Counsel as described in the following paragraph and should not be sent to this office. In addition, do not submit any business confidential information in the body of the letter submitted to this office. Please refer to RQ17-006 in HSM's response to this letter and in any confidentiality request submitted to the Office of Chief Counsel.

If HSM claims that any of the information or documents provided in response to this information request constitute confidential commercial material within the meaning of 5 U.S.C. § 552(b)(4),

or are protected from disclosure pursuant to 18 U.S.C. § 1905, HSM must submit supporting information together with the materials that are the subject of the confidentiality request, in accordance with 49 CFR Part 512, as amended, to the Office of Chief Counsel (NCC-100), National Highway Traffic Safety Administration, Room W41-227, 1200 New Jersey Avenue, S.E., Washington, D.C. 20590. HSM is required to **submit two copies of the documents containing allegedly confidential information (except only one copy of blueprints) and one copy of the documents from which information claimed to be confidential has been deleted.** Please remember that the phrase "ENTIRE PAGE CONFIDENTIAL BUSINESS INFORMATION" or "CONTAINS CONFIDENTIAL BUSINESS INFORMATION" (as appropriate) must appear at the top of each page containing information claimed to be confidential, and the information must be clearly identified in accordance with 49 CFR 512.6. If you submit a request for confidentiality for all or part of your response to this IR, that is in an electronic format (e.g., CD-ROM), your request and associated submission must conform to the new requirements in NHTSA's Confidential Business Information Rule regarding submissions in electronic formats. *See* 49 CFR 512.6(c) (as amended by 72 Fed. Reg. 59434 (October 19, 2007)).

If you have any questions regarding submission of a request for confidential treatment, contact Otto Matheke, Senior Attorney, Office of Chief Counsel at otto.matheke@dot.gov or (202) 366-5253.

Due Date

HSM's response to this letter, in duplicate, together with a copy of any confidentiality request, must be submitted to this office by **September 19, 2017**. HSM's response must include all non-confidential attachments and a redacted version of all documents that contain confidential information. If HSM finds that it is unable to provide all the information requested within the time allotted, HSM must request an extension from me at (202) 366-8726 no later than five business days before the response due date. If HSM is unable to provide all the information requested by the original deadline, it must submit a partial response by the original deadline with whatever information HSM then has available, even if an extension has been granted.

Please send email notification to Xiaoming Tan at xiaoming.tan@dot.gov and to ODI_IRresponse@dot.gov when HSM sends its response to this office and indicate whether there is confidential information as part of HSM's response.

If you have any technical questions concerning this matter, please call Xiaoming Tan of my staff at (202) 366-8575.

Sincerely,

Kara Fischer, Acting Chief
Recall Management Division
Office of Defects Investigation

Enclosure 1, Copies of the subject reports referenced in the introduction of this letter identified by the following ODI reference numbers: 10966540, 10984048, and 11014308.

Form Approved: O.M.B. No. 2127-0008

U.S. Department of Transportation

National Highway Traffic Safety Administration

DOT Auto Safety Hotline

Vehicle Owner's Questionnaire

To Report Vehicle Safety Defects
1-888-DASH-2-DOT
(1-888-327-4236)
INTERNET:www.nhtsa.dot.gov/hotline

FOR AGENCY USE ONLY 311	
Date Received	**Repository** ☐
07-AUG-2017	Reference No. 11014308

OWNER INFORMATION (Type or Print)

Name LARRY JUDD		Daytime Telephone Number 319-389-6666	E-mail Address MLJUDD@AOL.COM
Address 308 TROY ST. SW		Evening Telephone Number	
City CEDAR RAPIDS	**State** IA **Zip Code** 52404		

The information you provide will be used to identify potential safety-related defects. We may share your information with the applicable vehicle manufacturer during an investigation or recall in accordance with the routine uses described in the agency's Privacy Act notice. See 49 FR 53971 (Sep. 3, 2004).

VEHICLE INFORMATION

17 digit Vehicle Identification Number Located at bottom of windshield on driver's side	Make	Model	Model Year
4EZFD2822D6089927	KZRV	DURANGO 1500	2013

Date Purchased	Dealer's Name and Telephone Number			Engine: No: Cylinders	Fuel Type:
Original Owner ☐	Dealer's City	State	Zip Code		

Transmission Type	☐ Antilock Brakes ☐ Cruise Control	Powertrain	Multiple Failure:	Incident Date(s) 17-JUL-2017

FAILED COMPONENT(S)/PART(S) INFORMATION

Vehicle Component Code: 354000 EQUIPMENT: MECHANICAL	Failure Mileage	Failure Speed

ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A TIRE FAILURE

Tire Make	Tire Model (Name or Number)	Tire Size (Example P215/65R15)
DOT No. (Example: DOTMAL9ABC036)	☐ Original Equipment ☐ Prior Repair	Failure Location:
Tire Component Code		Tire Failure Type:

ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A CHILD SEAT FAILURE

Make:	Date Manufactured:	Model No./Name:
Seat Type:	Installation System:	
Child Seat Component Code:	Failed Part:	

APPLICABLE INCIDENT INFORMATION

(Please describe in detail the incident(s), Failure(s), Crash(es), and injury(ies).)

Crash	Fire	Number of Persons Injured	Number of Deaths	Reported to Police
☐ Yes ☒ No	☐ Yes ☒ No			N

Narrative Description of Incident(S), Crash(es), and Injury(ies).
Please describe (1) events leading up to the failure, (2) failure and its consequences, and (3) what was done to correct the failure; i.e, parts repaired or replaced (and if old part is available).

AS I WAS STEPPING OUT OF MY 2013 KZRV DURANGO 1500, THE STEP RIVET BROKE AND I FELL ONTO THE GROUND. FORTUNEATELY, I WAS NOT INJURED EXCEPT FOR SOME SCRAPES ON MY KNEES. I FOUND OUT THROUGH A FRIEND THAT A RECALL WAS ISSUED BY KZRV FOR RIVET FAILURES ON QUAD STEPS. ONE OF THE RIVETS IDENTIFIED IN THE RECALL WAS A #08 RIVET WHICH WAS THE SAME AS THE RIVET ON MY STEP EXCEPT MINE WERE A 3-STEP AND NOT THE 4-STEP AS MENTIONED IN THE RECALL.

Include, if available: Police/Fire Department Report, Photos, and Repair Invoice. ATTACH ADDITIONAL SHEETS IF NECESSARY

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 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.

Form Approved: O.M.B. No. 2127-0008

U.S. Department of Transportation

National Highway Traffic Safety Administration

DOT Auto Safety Hotline

Vehicle Owner's Questionnaire

To Report Vehicle Safety Defects
1-888-DASH-2-DOT
(1-888-327-4236)
INTERNET:www.nhtsa.dot.gov/hotline

FOR AGENCY USE ONLY 100148	
Date Received 17-MAR-2017	**Repository** ☐
	Reference No. 10966540

OWNER INFORMATION (Type or Print)

Name TED MARTIN		Daytime Telephone Number 3198262911	E-mail Address TBEAR340@YAHOO.COM
Address 340 DAWES RD		Evening Telephone Number	
City HIAWATHA	**State** IA **Zip Code** 52233		

The information you provide will be used to identify potential safety-related defects. We may share your information with the applicable vehicle manufacturer during an investigation or recall in accordance with the routine uses described in the agency's Privacy Act notice. See 49 FR 53971 (Sep. 3, 2004).

VEHICLE INFORMATION

17 digit Vehicle Identification Number Located at bottom of windshield on driver's side	Make	Model	Model Year
4EZFD3324G6121343	KZRV	DURANGO	2016

Date Purchased	Dealer's Name and Telephone Number			Engine: No: Cylinders	Fuel Type:
Original Owner ☐	Dealer's City	State	Zip Code		

Transmission Type	☐ Antilock Brakes ☐ Cruise Control	Powertrain	Multiple Failure:	Incident Date(s) 14-MAR-2017

FAILED COMPONENT(S)/PART(S) INFORMATION

Vehicle Component Code: 162000 STRUCTURE: BODY	Failure Mileage 700	Failure Speed

ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A TIRE FAILURE

Tire Make	Tire Model (Name or Number)	Tire Size (Example P215/65R15)
DOT No. (Example: DOTMAL9ABC036)	☐ Original Equipment ☐ Prior Repair	Failure Location:
Tire Component Code		Tire Failure Type:

ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A CHILD SEAT FAILURE

Make:	Date Manufactured:	Model No./Name:
Seat Type:	Installation System:	
Child Seat Component Code:	Failed Part:	

APPLICABLE INCIDENT INFORMATION

(Please describe in detail the incident(s), Failure(s), Crash(es), and injury(ies).)

Crash	Fire	Number of Persons Injured	Number of Deaths	Reported to Police
☐ Yes ☒ No	☐ Yes ☒ No	1		N

Narrative Description of Incident(S), Crash(es), and Injury(ies).
Please describe (1) events leading up to the failure, (2) failure and its consequences, and (3) what was done to correct the failure; i.e, parts repaired or replaced (and if old part is available).

TL* THE CONTACT OWNS A 2016 KZRV DURANGO 2500 FIFTH WHEEL. WHILE THE CONTACT WAS WALKING UP THE STEPS INTO THE RV THE TOP RIVET FAILED AND THE STAIRS COLLAPSED. THE CONTACT FELL TO THE GROUND AND SUSTAINED BACK KNEE, AND HIP INJURIES. MEDICAL ATTENTION WAS NOT RECEIVED. THE RV WAS TAKEN TO A DEALER, BUT WAS NOT DIAGNOSED OR REPAIRED. THE MANUFACTURER WAS MADE AWARE OF THE ISSUE. THE APPROXIMATE FAILURE MILEAGE WAS 700. UPDATED 04/28/17*LJ

Include, if available: Police/Fire Department Report, Photos, and Repair Invoice. ATTACH ADDITIONAL SHEETS IF NECESSARY

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 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.

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(1-888-327-4236)
INTERNET:www.nhtsa.dot.gov/hotline

FOR AGENCY USE ONLY 311

Date Received	Repository ☐
04-MAY-2017	Reference No. 10984048

OWNER INFORMATION (Type or Print)

Name	Daytime Telephone Number	E-mail Address
WILLIAM DYAL	319-899-0122	
Address 2445 DEBORAH DR SW	Evening Telephone Number	
City CEDAR RAPIDS **State** IA **Zip Code** 52404		

The information you provide will be used to identify potential safety-related defects. We may share your information with the applicable vehicle manufacturer during an investigation or recall in accordance with the routine uses described in the agency's Privacy Act notice. See 49 FR 53971 (Sep. 3, 2004).

VEHICLE INFORMATION

17 digit Vehicle Identification Number Located at bottom of windshield on driver's side	Make	Model	Model Year
4EZFD3328F6023463	KZRV	DURANGO	2016

Date Purchased	Dealer's Name and Telephone Number			Engine: No: Cylinders	Fuel Type:
Original Owner ☐	Dealer's City	State	Zip Code		

Transmission Type	☐ Antilock Brakes ☐ Cruise Control	Powertrain	Multiple Failure:	Incident Date(s) 01-MAR-2017

FAILED COMPONENT(S)/PART(S) INFORMATION

Vehicle Component Codes: 160000 STRUCTURE, 354000 EQUIPMENT: MECHANICAL	Failure Mileage	Failure Speed

ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A TIRE FAILURE

Tire Make	Tire Model (Name or Number)	Tire Size (Example P215/65R15)
DOT No. (Example: DOTMAL9ABC036)	☐ Original Equipment ☐ Prior Repair	Failure Location:
Tire Component Code		Tire Failure Type:

ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A CHILD SEAT FAILURE

Make:	Date Manufactured:	Model No./Name:
Seat Type:	Installation System:	
Child Seat Component Code:	Failed Part:	

APPLICABLE INCIDENT INFORMATION

(Please describe in detail the incident(s), Failure(s), Crash(es), and injury(ies).)

Crash	Fire	Number of Persons Injured	Number of Deaths	Reported to Police
☐ Yes ☒ No	☐ Yes ☒ No			N

Narrative Description of Incident(S), Crash(es), and Injury(ies).
Please describe (1) events leading up to the failure, (2) failure and its consequences, and (3) what was done to correct the failure; i.e, parts repaired or replaced (and if old part is available).

AS I WAS STEPPING INTO THE RV, THE UPPER STEP SEPARATED ON ONE SIDE. FORTUNATELY, I WAS ABLE TO GRAB ONTO THE RV OTHERWISE I WOULD'VE FALLEN. UPON INSPECTING THE STEPS I FOUND A RIVET THAT HAD BROKEN WHICH CONNECTS THE STEP TO A BRACKET. SEE PHOTOS. I CONTACTED THE DEALER AND THEY INFORMED ME MY RV WAS NOT WITHIN THE RECALL ISSUED BY KZRV. I ASKED THEM TO ORDER THE KIT REQUIRED AND IF THEY COULD NOT PROVIDE ANY GOODWILL TOWARD INSTALLING THE KIT, I WOULD DO IT MYSELF. THE RV HAS BEEN TAKEN TO THE DEALER FOR REPAIRS. THIS RV IS A 2015 DURANGO 2500 336R3T.

Include, if available: Police/Fire Department Report, Photos, and Repair Invoice. ATTACH ADDITIONAL SHEETS IF NECESSARY

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 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.