



605 West Crystal Lake Rd
Forest City, Iowa 50436
PH: 641/585-3535 FAX: 641/585-6966

NOVEMBER 29, 2004

RECALL 92

RE: BODY SERIAL
CHASSIS SERIAL

Dear Owner:

This notice is being sent to you in accordance with the requirements of the National Traffic and Motor Vehicle Safety Act. Our records indicate that you have purchased a vehicle with the serial number which appears above. If you have paid to have this defect corrected, you may be eligible for reimbursement. To be eligible, you must meet the requirements described in the enclosed Reimbursement Plan Notice.

REASON FOR THIS RECALL

Winnebago Industries, Inc., has been informed that a defect exists on certain 2004 and 2005 model year Winnebago® and Itasca® (Models: Rialta®, Sightseer®, Sunova®, Brave®, Voyage, Sunrise®, Adventurer®, Suncruiser®, Chieftain®, Sunflyer®, Journey®, Meridian™, Vectra®, and Horizon®) motor homes. These motor homes were manufactured September 8, 2003 through April 30, 2004.

Am-Safe Commercial Products (supplier to Winnebago Industries®) has decided that your seat belt may fail to conform to Federal Motor Vehicle Safety Standard No. 209, "Seat Belt Assemblies." These seat belts do not meet the strength requirements of FMVSS 209. The consequence of this nonconformance is, in the event of a vehicle crash, the buckle could release leaving the occupant unrestrained, possibly resulting in serious injury or even death.

WHAT WE WILL DO

Winnebago Industries, Inc. dealers will replace the defective belt assembly at no charge to you.

WHAT YOU SHOULD DO

Please contact your Winnebago Industries, Inc. dealer immediately to arrange for an appointment. Please allow sufficient time for your dealer to obtain the kit for this recall. The labor time necessary to perform this correction will be approximately one hour. Please allow time for the dealer to process your vehicle.

Winnebago Industries, Inc. dealers are best equipped to obtain parts and provide service to ensure your vehicle is corrected as promptly as possible. **HOWEVER**, if you take your vehicle to the dealer on the agreed date and he does not service this condition on that date or within five days, we recommend you contact Winnebago Industries, Inc., Attention: Owner Relations Representative (641-585-6939). If you are still unable to obtain such installation without charge to you and within a reasonable time, you may contact the Administrator, N.H.T.S.A., Washington, DC 20590, or call toll free, Auto Safety Hot Line, 888-327-4236.

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Presentation of this letter to the service center will assist in making the necessary correction to your vehicle in the shortest possible time. If you have sold or traded your vehicle, please let us know by completing the postage-paid owner reply card and returning it to us.

Federal law requires that any vehicle lessor receiving this recall notice must forward a copy of this notice to the lessee within ten days.

We are sorry to cause you this inconvenience; however, we have taken this action in the interest of your safety and continued satisfaction with our products. This letter does not constitute an acknowledgment of legal liability.

Winnebago Industries, Inc.
Forest City, Iowa 50436

Enclosure

REIMBURSEMENT PLAN NOTICE

Dear Owner:

If you have already paid to have this defect or noncompliance corrected (Winnebago Industries® Recall No. 92), you may be eligible for reimbursement under this plan.

TO BE ELIGIBLE, YOU MUST MEET ALL OF THE FOLLOWING REQUIREMENTS:

1. You own or have owned a Winnebago® or an Itasca® (Models: Rialta®, Sightseer®, Sunova®, Brave®, Voyage, Sunrise®, Adventurer®, Suncruiser®, Chieftain®, Sunflyer®, Journey®, Meridian™, Vectra®, and Horizon®) motor home built between September 8, 2003 through April 30, 2004.
2. You have paid to replace a defective seat belt assembly.
3. The repair was performed on or prior to November 12, 2004.
4. You have the original repair order or invoice showing:
 - ♦ Vehicle model and year or VIN.
 - ♦ Repair date.
 - ♦ Itemized labor charges including description of the seat belt replacement.
 - ♦ Your name and address at the time of repair.
 - ♦ Name and address of repair shop.

TO REQUEST REIMBURSEMENT:

1. Complete the reimbursement application. (See reverse side.)
2. Mail this application along with the original copy of the repair order or invoice to:

Attention: Owner Relations
Winnebago Industries, Inc.
605 West Crystal Lake Road
P.O. Box 152
Forest City, IA 50436

3. Retain copies of repair order or invoice for your records.

SEE REVERSE SIDE FOR REIMBURSEMENT APPLICATION

Recall92/7

**REIMBURSEMENT APPLICATION
WINNEBAGO INDUSTRIES, INC.**

RECALL CAMPAIGN NO. 92

Please Print All Information:

First Name: _____

Last Name: _____

Mailing Address: _____

Telephone Number: _____

(If we need additional information)