

Safety Defect and Noncompliance Report Guide for Vehicles  
**PART 573 Defect and Noncompliance Responsibility and Reports<sup>1</sup>**

On September 8, 2008, Accubuilt, Inc. decided that (a defect which relates to motor vehicle safety)(a noncompliance with Federal Motor Vehicle Safety Standard No. S7 of FMVSS 403 ) exists in the motor vehicles listed below, and is furnishing notification to the National Highway Traffic Safety Administration in accordance with 49 CFR Part 573 Defect and Noncompliance Responsibility and Reports.

Date this report was prepared: September 8, 2008

Furnish the manufacturer's identification code for this recall (if applicable): \_\_\_\_\_

1. Identify the full corporate name of the fabricating manufacturer of the vehicle being recalled. If the recalled vehicle is imported, provide the name and mailing address of the designated agent as prescribed by 49 U.S.C. §30164.

Accubuilt, Inc. 2811 Tuscany Drive - Elkhart, Indiana 46514

Identify the corporate official, by name and title, whom the agency should contact with respect to this recall.

Michael Dadosky - Quality Manager

Telephone Number: (574) 970-7786 Fax No.: (574) 389-1414

Name and Title of Person who prepared this report.

Michael Dadosky  
Quality Manger

Signed: *Michael Dadosky*

RECEIVED  
2008 OCT -6 10:35 AM  
DEFECTS INVESTIGATION  
RECALL MGMT DIV.

<sup>1</sup> Each manufacturer must furnish a report, to the Associate Administrator for Enforcement, for each defect or noncompliance condition which relates to motor vehicle safety.

This guide was developed from 49 CFR Part 573, "Defect and Noncompliance Responsibility and Reports" and also outlines information currently requested. Any questions, please consult the complete Part 573 or contact Mr. George Person at (202) 366-5210, by FAX at (202) 366-7882, or by E-Mail to [RMD.ODI@dot.gov](mailto:RMD.ODI@dot.gov).

**I. Identify the Vehicle Models Involved in the Recall**

**2. Identify the Vehicles Involved in the Recall, for each make and model or applicable vehicle line (provide illustrations or photographs as necessary to describe the vehicle), provide:**

Make(s): Ford Model Years Involved: 2006-08 Model(s): E-150 Cargo Van

Production Dates: Beginning: 10/17/05 Ending: 10/12/07

VIN Range: Beginning: \_\_\_\_\_ Ending: \_\_\_\_\_

Vehicle Type: MPV Body Style: Ford Cargo Van

**Descriptive information which characterizes/distinguishes the recalled vehicles from those model vehicles not included in the recall:**

The suspect vans will have Ricon lifts in them

Make(s): Ford Model Years Involved: 2006-08 Model(s): E-250 Cargo Van

Production Dates: Beginning: 10/17/05 Ending: 10/12/07

VIN Range: Beginning: \_\_\_\_\_ Ending: \_\_\_\_\_

Vehicle Type: MPV Body Style: Ford Cargo Van

**Descriptive information which characterizes/distinguishes the recalled vehicles from those model vehicles not included in the recall:**

The suspect vans will have Ricon lifts in them

Make(s): Ford Model Years Involved: 2006-08 Model(s): E-350 Cargo Van

Production Dates: Beginning: 10/17/05 Ending: 10/12/07

VIN Range: Beginning: \_\_\_\_\_ Ending: \_\_\_\_\_

Vehicle Type: MPV Body Style: Ford Cargo Van

**Descriptive information which characterizes/distinguishes the recalled vehicles from those model vehicles not included in the recall:**

The suspect vans will have Ricon lifts in them

**Identify the approximate percentage of the production of all the recalled models manufactured by your company between the inclusive dates of manufacture provided above, that the recalled model population represents. For example, if the recall involved Vehicles equipped with certain items of equipment from January 1, 1996 through April 1, 1997, then what was the percentage of the recalled Vehicles of all Vehicles manufactured during that time period.**

**Approximately 45% of units built during this time period could have Ricon lifts.**

**II. Identify the Recall Population**

**3. Furnish the total number of vehicles recalled potentially containing the defect or noncompliance.**

<b>Model</b>	<b>Year</b>	<b>Number of Vehicles Potentially Involved</b>
Ford E-150	2006	0
Ford E-150	2007	10
Ford E-150	2008	30
Ford E-250	2006	100
Ford E-250	2007	250
Ford E-250	2008	200
Ford E-350	2006	100
<b>Ford E-350</b>	<b>2007</b>	<b>100</b>
<b>Ford E-350</b>	<b>2008</b>	<b>100</b>

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**Total Number Potentially Affected by the Recall:** 890

**4. Furnish the approximate percentage of the total number of vehicles estimated to actually contain the defect or noncompliance:**

**Identify and describe how the recall population was determined--in particular how the recalled models were selected and the basis for the beginning and final dates of manufacture of the recalled vehicles:**

Ricon submitted to Accubuilt, Inc. a list of serial numbers which they determined were suspect  
Based on their internal production metrics. Accubuilt, Inc. was given the serial number, model  
Number, and the date the lift was shipped to Accubuilt, Inc.

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**III. Describe the Defect or Noncompliance**

**5. Describe the defect or noncompliance. The description should address the nature and physical location of the defect or noncompliance. Illustrations should be provided as appropriate.**

The Threshold Warning System may not detect the presence of a "wheelchair test device" when tested in accordance with S7.4 of the FMVSS 403.

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**Describe the cause(s) of the defect or noncompliance condition.**

Results from misinterpretation of the testing parameters.

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**Describe the consequence(s) of the defect or noncompliance condition.**

The threshold warning signal may not activate when a certain point on the threshold area is encroached.

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**Identify any warning which can (a) precede or (b) occur.**

With the lift platform one inch or more below vehicle floor level, the Threshold Warning System will activate when a wheelchair or individual using a mobility aid enters the designated Threshold area but may deactivate if the wheelchair or mobility aid user continues to move toward a certain point on the threshold area.

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**If the defect or noncompliance is in a component or assembly purchased from a supplier, identify the supplier by corporate name and address.**

Ricon Corporation – A Division of Vapor Bus International

7900 Nelson Road

Panorama City, CA 91402

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**Identify the name and title of the chief executive officer or knowledgeable representative of the supplier:**

William Hinze – Director of Marketing

#### **IV. Provide the Chronology in Determining the Defect/Noncompliance**

*If the recall is for a defect, complete item 6, otherwise item 7.*

**6. With respect to a defect, furnish a chronological summary (including dates) of all the principle events that were the basis for the determination of the defect. The summary should include, but not be limited to, the number of reports, accidents, injuries, fatalities, and warranty claims.**

**7. With respect to a noncompliance, identify and provide the test results or other data (in chronological order and including dates) on which the noncompliance was determined.**

NHTSA Compliance Test Report # 638657A and NHTSA -2007-28140 Notice 1 formed the basis for Ricon Corporation's determination of noncompliance. There have been no claims, accidents, injuries or fatalities associated with this noncompliance.

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#### **V. Identify the Remedy**

**8. A description of the manufacturer's program for remedying the defect or noncompliance. This program shall include a plan for reimbursing an owner or purchaser who incurred costs to obtain a remedy for the problem addressed by the recall within a reasonable time in advance of the manufacturer's notification of owners, purchasers and dealers, in accordance with §573.13 of this part. A manufacturer's plan may incorporate by reference a general reimbursement plan it previously submitted to NHTSA, together with information specific to the individual recall. Information required by §573.13 that is not in a general reimbursement plan shall be submitted in the manufacturer's report to NHTSA under this section. If a manufacturer submits one or more general reimbursement plans, the manufacturer shall update each plan every two years, in accordance with §573.13. The manufacturer's remedy program and reimbursement plans will be available for inspection by the public at NHTSA headquarters.**

**“See Ricon recall 07E-095”**

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**9. Furnish a description of the manufacturer's remedy for the defect or noncompliance. Clearly describe the differences between the recall condition and the remedy.**

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**Clearly describe the distinguishing characteristics of the remedy component/assembly versus the recalled component/assembly.**

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**Identify and describe how and when the recall condition was corrected in production. If the production remedy was identical to the recall remedy in the field, so state. If the product was discontinued, so state.**

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**VI. Identify the Recall Schedule**

**10. Furnish a schedule or agenda (with specific dates) for notification to other manufacturers, dealers/retailers, and purchasers. Please, identify any foreseeable problems with implementing the recall.**

Accubuilt, Inc. will identify the company/individual the vehicle with the assigned lift serial number was shipped to, and mail the approved recall notification letter. We will submit this list to Ricon Corporation. When our letter has been approved we will begin mailing out the letters within one week. Our intent is to have all letters mailed out by September 30, 2008.

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## **VII. Furnish Recall Communications**

**11. Furnish a final copy of all notices, bulletins, and other communications that relate directly to the defect or noncompliance and which are sent to more than one manufacturer, distributor, or purchaser. This includes all communications (including both original and follow-up) concerning this recall from the time your company determines the defect or noncompliance condition on, not just the initial notification. A DRAFT copy of the notification documents should be submitted to this office by Fax (202-366-7882) or by E-Mail to [RMD.ODI@dot.gov](mailto:RMD.ODI@dot.gov) for review prior to mailing.**

**Note that these documents are to be submitted separately from those provided in accordance with Part 579.5 requirements.**





2811 Tuscany Dr.  
Elkhart, IN 46514

Phone: (800) 837-8624  
Fax: (574) 389-1414

[www.drivetuscany.com](http://www.drivetuscany.com)

**September 08, 2008**

**Dear Owner**

**(Name of Company where lift was shipped to)  
(Address)**

**This notice is sent to you in accordance with the requirements of the National Traffic and Motor Vehicle Safety Act.**

**Accubuilt, Inc. has determined that a noncompliance exists in Ricon Corporation wheelchair lifts installed by Accubuilt, Inc.. The recall involves Series K and Series S lifts installed in Ford E-Series vehicles made in Lima, Ohio and Elkhart, Indiana. The noncompliant lifts were installed between October 17, 2005 and October 12, 2007. Our records indicate you purchased one or more of the lifts with the serial number on the recall list.**

**WHY IS IT BEING RECALLED:**

**The noncompliance with S6.1 of the FMVSS 403 is the result of the Threshold Warning System not detecting the presence of a wheelchair or mobility aid user in a certain spot within the defined threshold area.**

**WHAT ACCUBUILT., INC. WILL DO:**

**Accubuilt, Inc. will mail the Vehicle Defect Owner Notification Letter to all end-users based upon our SHIP TO address on file. Accubuilt, Inc. will send a copy of this letter to Ricon Corporation along with the serial #, Model #, and the end user, based upon the "Ship To" address.**

**WHAT YOU SHOULD DO:**

**Upon receipt of this notification, please contact your local Ricon service center/dealer to arrange a service date. Instructions for making this correction have been sent to your Ricon dealer and the parts are available. The retrofit should require about ½ hour, but ask your dealer how long the retrofit will take. The lift retrofit will include removal and replacement of the Threshold Warning System (TWS) covers and using TWS retrofit kit # 39979. Ricon will provide all the necessary replacement parts at NO CHARGE.**





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**NHTSA – non-compliance notifications**  
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**If the lift is retrofitted by an authorized Ricon dealer and it not completed within 3 business days, please notify Ricon Customer Support at (818)267-3000.**

**If, after contacting the authorized dealer and Ricon Customer Support, your inspection and/or repair is not completed in a reasonable time and without charge you may notify:**

**US DOT-NHTSA  
Office of Defects Investigation  
Recall Management / W46-437  
1200 New Jersey Ave., SE  
Washington, D.C. 20590  
Phone (202) 493-0481**

**Sincerely,**

**Michael Dadosky  
Accubuilt, Inc.  
Quality Manger**

