08V-647
(15 Pages)

Safety Defect and Noncompliance Report Guide for Vehicles

PART 573 Defect and Noncompliance Responsibility and Reports[1]

On FEBRUARY 29 **, 2008,** RICON **[MFR] decided that (a defect which relates to motor vehicle safety)(a noncompliance with Federal Motor Vehicle Safety Standard No. _____) 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: NOVEMBER 26, 2008

Furnish the manufacturer's identification code for this recall (if applicable): 07E-095

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.

MYERS EQUIPMENT CORPORATION
8860 AKRON CANFIELD ROAD
CANFIELD, OHIO 44406

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

JIM GRIFFITH, WARRANTY ADMINISTRATOR

Telephone Number: 330-533-5556 **Fax No.:** 330-533-2784

Name and Title of Person who prepared this report.

PAUL MYERS
WEB ADMINISTRATOR

Signed:

RECEIVED
2008 DECEMBER 9 – 10:00 AM
OFFICE OF RECALL
MANAGEMENT DIVISION

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[1] 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.

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): THOMAS **Model Years Involved:** 2008 **Model(s):** 1208S

Production Dates: Beginning: _____ **Ending:** _____

VIN Range: Beginning: _____ **Ending:** 1T88N4C2281

Vehicle Type: BUS **Bodystyle:** TRANSIT ENGINE FRONT

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

ASHTABULA COUNTY BOARD OF MR/DD 2505 S. RIDGE ROAD EAST

LIFT SN 203243 ASHTABULA, OHIO 44004

Make(s): THOMAS **Model Years Involved:** 2007 **Model(s):** 101PS

Production Dates: Beginning: _____ **Ending:** _____

VIN Range: Beginning: 4UZAAXCSX7CX25178 **Ending:** 4UZAAXCS17C

Vehicle Type: BUS **Bodystyle:** CONVENTIONAL C2

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

STARK COUNTY BOARD OF MR/DD 3059 CLEVELAND AVENUE

LIFT SN 203244, 203241 CANTON, OHIO 44707

Make(s): GMC **Model Years Involved:** 2006 **Model(s):** 3500

Production Dates: Beginning: _____ **Ending:** _____

VIN Range: Beginning: _____ **Ending:** 1GJHG39436 1

Vehicle Type: VAN **Bodystyle:** VAN

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

WINDSOR HOUSE 101 WEST LIBERTY

LIFT SN 207906 GIRARD, OHIO 44420

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.

LIFT SN 203242 IN STOCK AT MYERS EQUIPMENT CORP.

II. Identify the Recall Population

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

Model	Year	Number of Vehicles Potentially Involved
DEALER ONLY, NOT MANUFACTURER		
SEE ATTACHED		

Total Number Potentially Affected by the Recall: 4

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:

DEALER ONLY, NOT MANUFACTURER

SEE ATTACHED

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.

DEALER ONLY, NOT MANUFACTURER

SEE ATTACHED

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

DEALER ONLY, NOT MANUFACTURER

SEE ATTACHED

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

DEALER ONLY, NOT MANUFACTURER

SEE ATTACHED

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

DEALER ONLY, NOT MANUFACTURER

SEE ATTACHED

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

DEALER ONLY, NOT MANUFACTURER

SEE ATTACHED

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

SEE ATTACHED

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.

DEALER ONLY, NOT MANUFACTURER

SEE ATTACHED

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.

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SEE ATTACHED

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.

DEALER ONLY, NOT MANUFACTURER

SEE ATTACHED

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

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SEE ATTACHED

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.

DEALER ONLY, NOT MANUFACTURER

SEE ATTACHED

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.

DEALER ONLY, NOT MANUFACTURER

SEE ATTACHED

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 for review prior to mailing.***

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

Ricon
A Wabtec company

Ricon Corporation
A Division of Vapor Bus International
7900 Nelson Road
Panorama City, CA 91402

Phone: 818.267.3000
Fax: 818.267.3001
www.Wabtec.com

February 29, 2008

Craig Myers
Myers Equipment
601 East Main Street
Canfield, OH 44406-9507

RE: Equipment Safety Standard Non-Compliance Notification #07E-095, Threshold Warning System

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

Dear Craig Myers,

Ricon Corp. needs your assistance in notifying your customers about a recall of certain wheelchair lift products built between April 1, 2005 and October 9, 2007 inclusive. Ricon Corporation has determined that a safety related noncompliance with S6.1 of the FMVSS 403 exists in public and private use wheelchair lifts manufactured by Ricon on the above dates.

WHAT IS BEING RECALLED:

This recall process applies to the "Threshold Warning System" only on Ricon's "1200, 2000 and 5500" series platform lifts labeled for "DOT Public Use" and "DOT Private Use". It does not apply to other Ricon products.

WHY IS IT BEING RECALLED:

The non-compliance 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. In the event this condition occurs during passenger operations the wheelchair or mobility aid user may move toward the vehicle lift door when the lift platform is below floor level. This situation could cause personal injury.

Ricon
A Wabtec company

Ricon Corporation
A Division of Vapor Bus International
7900 Nelson Road
Panorama City, CA 91402

Phone: 818.267.3000
Fax: 818.267.3001
www.Wabtec.com

WHAT YOU AS THE OEM/INSTALLER NEED TO DO:

Ricon has enclosed a complete list of the lifts you purchased that were manufactured during the specified time period. This information will help you identify your end-user customers and provide the following instructions to them:

You will need Ricon Kit # 39979, provided at no charge.

1. **Park the vehicle in a safe location.**
2. **Locate and remove 2 bolts at the bottom of the Threshold Warning System (TWS) covers on the inboard surfaces of the right and left side baseplate towers.**
3. **Slide the covers up to remove top cover clips from towers.**
4. **Remove optical sensors and retainer clips from inside the two cover assemblies.**
5. **Reinstall sensors into new TWS covers with new retainer clips provided.**
6. **Slide new covers over towers and reinstall the 2 bolts at the bottom of the towers.**
7. **Discard original parts.**

WHAT RICON CORPORATION WILL DO:

Upon notification from your end-user customer, Ricon will work with them to obtain the necessary parts and make the retrofit. If the end-user is already factory trained to perform this service, the retrofit can be done at the end-user's location. If the end-user is not factory trained to perform this service, we will arrange for the retrofit to be done at the nearest Ricon authorized service center/dealer. The lift retrofit will include removal and replacement of the TWS covers using TWS retrofit kit # 39979. We will provide all the necessary replacement parts at No Charge and will pay labor of $37.50 for each retrofit.

If the lift is retrofitted by an authorized Ricon dealer and it is not completed within 3 business days, please notify Ricon Customer Support at the toll free number listed above.

Ricon
A Wabtec company

Ricon Corporation
A Division of Vapor Bus International
7900 Nelson Road
Panorama City, CA 91402

Phone: 818.267.3000
Fax: 818.267.3001
www.Wabtec.com

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:

Associate Administrator for Enforcement
National Highway Traffic Safety Administration
1200 New Jersey Ave., SE
Washington, D. C. 20590
Phone (888) 327-4236

Ricon Corp. will take responsibility for compiling and submitting required "Quarterly Reports" to NHTSA covering end-user retrofits upon receipt of the customer (end-user) contact information from each OEM/Dealer.

Thank you for your prompt attention to this matter. If you have any questions concerning these procedures please contact the undersigned at (818) 267-3085 or by email at OPardinas@Wabtec.com.

Sincerely,

Oscar Pardinas

Director – Business Development and Communications

Ricon Corp.

Ricon
A Wabtec company

Ricon Corporation
A Division of Vapor Bus International
7900 Nelson Road
Panorama City, CA 91402

Phone: 818.267.3000
Fax: 818.267.3001
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February 29, 2008

Safety Standard Non-Compliance Recall Notification - #07E-095

This notice is posted as a convenience to our customers who wish to check their Ricon lift serial number(s) against the master list of lifts requiring inspection and/or repair. Ricon Corp. has determined that a safety related non-compliance with S6.1 of the 403 (Threshold Warning System) exists in certain "DOT Public Use" and "DOT Private" platform wheelchair lifts manufactured between April 1, 2005 and October 9, 2007.

WHY ARE WE CONDUCTING THIS RECALL:

The non-compliance 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. In the event this condition occurs during passenger operations the wheelchair or mobility aid user may move toward the vehicle lift door when the lift platform is below floor level. This situation could cause personal injury.

WHAT YOU SHOULD DO:

On the Ricon Webpage, locate the Serial number(s) on your lift(s). Enter each serial # in the space provided at the bottom of this page and press submit. If your serial # is one of those included in this recall follow the procedures outlined below to perform modifications as follow:

You will require Kit # 39979, supplied by Ricon at no charge

1. **Park the vehicle in a safe location.**
2. **Locate and remove 2 bolts at the bottom of the Threshold Warning System (TWS) covers on the inboard surfaces of the right and left side baseplate towers.**
3. **Slide the covers up to remove top cover clips from towers.**
4. **Remove optical sensors and retainer clips from inside the two cover assemblies.**
5. **Reinstall sensors into new TWS covers with new retainer clips provided.**
6. **Slide new covers over towers and reinstall the 2 bolts at the bottom of the towers.**
7. **Discard original parts.**

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WHAT RICON CORPORATION WILL DO:

If you are already factory trained to perform service on Ricon lifts, the repairs can be done at your location. If you are not factory trained to service Ricon lifts, we will arrange for the repairs to be done at the nearest Ricon authorized service center/dealer.

Upon notification Ricon will provide you or the Ricon authorized dealer, the replacement parts kit. We will provide all the necessary adjustment instructions and/or replacement parts Free of Charge.

We have attached an "Inspection/Repair Log", for your convenience, to record the Inspection and/or repairs that are completed on your lifts. Please download this form and return a copy of the completed Log indicating the inspection and/or repairs were completed to 818/267-3139.

Thank you for your prompt attention to this matter. If you have any questions concerning these procedures please contact Ricon at (818) 267-3085 or by email at opardinas@wabtec.com

Sample Recall Reply Card

End User Address

(Front)

OEM Address

NHTSA SAFETY RECALL REPLY

Recall Number – 07E-095

Threshold Warning System

(End User Name) owns/operates buses equipped with Ricon Wheelchair lifts with serial numbers matching the recall campaign.

Please schedule repair as soon as possible.

(End User Name) no longer owns/operates the buses mentioned in the recall. The new owner/operator of these buses is: _____

Ricon
A Wabtec company

Ricon Corporation
A Division of Vapor Bus International
7900 Nelson Road
Panorama City, CA 91402

Phone: 818.267.3000
Fax: 818.267.3001
www.Wabtec.com

INSPECTION/REPAIR LOG

Recall # 07E-095
Threshold Warning System

Date_____

Owner Name _____

Owner Address _____

_____

Lift Serial Number	Description of Work	Date Completed	Technician Name
	Applied Kit 39979		
	Applied Kit 39979		
	Applied Kit 39979		
	Applied Kit 39979		
	Applied Kit 39979		
	Applied Kit 39979		
	Applied Kit 39979		
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	Applied Kit 39979		

PLEASE RETURN A COPY OF THIS FORM WITH THE REQUESTED INFORMATIO THAT MUST BE REPORTED TO NHTSA. THANK YOU

SN #	Model #	Ship date	Reg. Acct	Order Acct	Reg. Acct Name	
203244	S5505-F1020000A	07/25/06	593150	593150	MYERS EQUIPMENT	413624
203241	S5505-F1020000A	07/25/06	593150	593150	MYERS EQUIPMENT	413624
203242	S5505-F1020000A	07/25/06	593150	593150	MYERS EQUIPMENT	413624
203243	S5505-F1020000A	07/25/06	593150	593150	MYERS EQUIPMENT	413624
207906	S1200-G00100100	10/31/06	593150	593150	MYERS EQUIPMENT	419324