08V-677
(6 pages)

Safety Defect and Noncompliance Report Guide for Vehicles
PART 573 Defect and Noncompliance Responsibility and Reports[1]

On June 23, 2008, Ricon Corporation, a division of Vapor Bus [MFR] decided that a safety related non-compliance with S6.10.2.3 of the FMVSS 403 exists in items of motor vehicle equipment listed below, and is furnishing notification to the National Highway Traffic Safety Administration in accordance with 49 CFR Part 573 Defect and Noncompliance Reports.

Date this report was prepared: September 9, 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.

Colonial Equipment Company
1310 Bailes Lane
Frederick, MD 21701

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

Craig Combs
General Manager
301-698-5100
301-698-5117 fax
ccombs@thebusplace.com

Sincerely,

RECEIVED
2008 DEC 18 10:35 AM
DEFECTS INVESTIGATION
RECALL MGMT DIV.

Craig Combs, General Manager
Colonial Equipment Company

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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): Ford **Model Years Involved:** 2006 - 2008 **Model(s):** E350 /E450 Cutaway chassis vehicles

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

VIN Range: Beginning: _____ **Ending:** _____

Vehicle Type: Bus **Bodystyle:** _____

Descriptive information which characterizes/distinguishes the recalled vehicles from those model vehicles not included in the recall:
Vehicles manufactured with Ricon wheelchair lifts

Make(s): Chevrolet **Model Years Involved:** 2006 - 2008 **Model(s):** G- van cutaway chassis vehicles

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

VIN Range: Beginning: _____ **Ending:** _____

Vehicle Type: Bus **Bodystyle:** _____

Descriptive information which characterizes/distinguishes the recalled vehicles from those model vehicles not included in the recall:
Vehicles manufactured with Ricon wheelchair lifts

Make(s): _____ **Model Years Involved:** _____ **Model(s):** _____

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

VIN Range: Beginning: _____ **Ending:** _____

Vehicle Type: _____ **Bodystyle:** _____

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

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.

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
Ford cutaway chassis buses	2006 - 2008	35
Chevrolet cutaway chassis buses	2006 – 2008	15

Total Number Potentially Affected by the Recall: 50

4. Furnish the approximate percentage of the total number of vehicles estimated to actually contain the defect or noncompliance: 10%

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:

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.

Describe the cause(s) of the defect or noncompliance condition.
Results from misinterpretation of the testing parameters.

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.

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 a designated Threshold area but may deactivate if the wheelchair or mobility aid user continues to move toward a certain point on the threshold area.

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

7900 Nelson Road

Panorama City, CA 91402

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

Oscar Pardinas, Vice President of Sales and 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. N/A

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.

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.

Replacement of the Threshold Warning System metal covers and optical sensor mounting retainers will correct the noncompliance. Ricon will provide a kit for field replacement at no charge.

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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.

The replacement parts can be distinguished from the recall components by the location of the openings in the cover where the optical sensors are located. The remedy components will have openings spaced 5.25 inches apart while recall components will have openings spaced 7 inches apart.

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

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.

The recall condition was corrected in production on all lifts manufactured after October 9, 2007.

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.

Ricon Corporation anticipates the recall campaign will begin in December 31, 2007. At that time, manufacturers and dealers will be notified of their responsibilities in coordinating the campaign and making remedies to the recall population.

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.