



September 14, 2009

Mr. George Person
Chief, Recall Management Division
Office of Defects Investigation
National Highway Traffic Safety Administration
1200 New Jersey Avenue, SE
Washington, DC 20590

Re: Gillig Safety Recall – LIFT-U Wheelchair Lift

Dear Mr Person:

This letter is written to inform you of Gillig's intention to notify customers of a safety defect related to the LIFT-U Wheelchair Lifts installed on Gillig buses manufactured from 2001 – 2009. The recall affects 1,990 buses.

LIFT-U discovered the defect which relates to a certain Logic Board Assembly and notified Gillig on September 9, 2009.

Attached is Gillig's 573 report. If you have any questions, please give me a call at 510-264-5037 or E-Mail greg.vismara@gillig.com

Sincerely,

GILLIG LLC

A handwritten signature in black ink that reads "Gregory J. Vismara".

Gregory J. Vismara
Vice President Engineering

Cc. Robert Birdwell
Steven R. Enochian

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2009 SEP 16 A 11:00
OFFICE OF DEFECTS
INVESTIGATION

Safety Defect and Noncompliance Report Guide for Vehicles
Part 573 Defect and Noncompliance Responsibility and Reports

On September 9, 2009, Gillig LLC decided that a defect which relates to motor vehicle safety 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 14, 2009

Furnish the manufacturer's identification code for this recall (if applicable): N/A

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.

Gillig LLC
25800 Clawiter Road
Hayward, Ca 94545

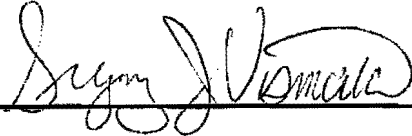
Identify the corporate official, by name and title, whom the agency should contact with respect to this recall.

Gregory J. Vismara
Vice President
Telephone number: 510-264-5037 **Fax Number:** 510-264-3897

Name and Title of Person who prepared this report:

Gregory J Vismara
Vice President

Signed:



I. Identify the Vehicle Models Involved in the Recall

2. Identify the Vehicles Involved in the Recall:

Make(s): Gillig LLC **Model Years Involved:** 2001-2009 **Model(s):** Phantom

Production Dates: Beginning: January 2001 **Ending:** August 2009

VIN Range: Beginning: 110468 **Ending:** 112848 (not sequential)

Vehicle Type: Transit Bus **Body style:** Phantom

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

Affected Vehicles are equipped with a Lift-U wheelchair lift which were shipped from Lift-U between the effective dates of January 2001 and August 2009 (Refer to 09E-051)

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. 100%

II. Identify the Recall Population

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

<u>Model</u>	<u>Year</u>	<u>Number of Vehicles Potentially Involved</u>
Phantom	2001-2009	1990

Total Number Potentially Affected by the Recall: 1990

4. Furnish the approximate percentage of the total number of vehicles estimated to actually contain the defect or noncompliance: 100%

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:

Based on the sales data from Lift-U - Refer to 09E-051

III. Describe the Defect or Noncompliance

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

Refer to 09E-051

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

Refer to 09E-051

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

Refer to 09E-051

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

Refer to 09E-051

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

Lift-U

Division of Hogan MFG Inc

P.O. Box 398

Escalon, Ca 95320-0398

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

Cleatus Lewis – Engineering Manager

IV. Provide the Chronology in Determining the Defect/Noncompliance

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.

Refer to 09E-051

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.

N/A

V. Identify the Remedy

A description of the manufacturer's program for remedying the defect or noncompliance. This program shall include a plan for reimbursing and 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.
Refer to 09E-051

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.
Refer to 09E-051

Clearly describe the distinguishing characteristics of the remedy component/assembly versus the recalled component/assembly.
Refer to 09E-051

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.
Refer to 09E-051

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 and foreseeable problems with implementing the recall.
Refer to 09E-051

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.