



October 15, 2010

Via FedEx

NHTSA - Associate Administrator for Enforcement  
Office of Defects Investigation, Defects Div. NVS-211  
1200 New Jersey Ave. S.E.  
Washington, DC. 20590

Dear Recipient:

As required by Federal Regulation 49 CFR Part 573; we are submitting the enclosed following communiqués.

- **Part 573 Defect and Noncompliance Report**
- **Dealership Advisement Letter – SB-08-131 ArvinMeritor - Tech Bulletin – Safety Recall**
- **ArvinMeritor - Tech Bulletin - TP-10172 Lower Axle Seat Weld Inspection and Repair for Meritor RideSentry™ MPA Series Sliding Tandem Trailer Air Suspension Systems**
- **ArvinMeritor - Availability of Replacement Parts and Service Instructions**
- **(Not disclosed to Dealership Network by Utility) NHTS Campaign ID No: 10E407000**

Respectfully submitted,

Blas Gonzalez, Regional Manager  
Field Service Department  
Utility Trailer Manufacturing Company

Utility Trailer Manufacturing Company  
17295 E. Railroad Street, City of Industry, California 91748 / (626) 965-1541  
Web Site: [www.utilitytrailer.com](http://www.utilitytrailer.com)

**PART 573 Defect and Noncompliance Report<sup>3</sup>**

On **October 8, 2010** Utility Trailer Manufacturing Co. confirmed a condition that may relate to motor vehicle safety 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 Reports.

Date this report was prepared: **October 13, 2010**

Furnish the manufacturer's identification code for this recall (if applicable): **ArvinMeritor – C10AB**, manufacturer of the recalled component.

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.

**UTILITY TRAILER MANUFACTURING COMPANY**  
**17295 E. RAILROAD STREET**  
**CITY OF INDUSTRY, CALIFORNIA 91748**

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


**Sal Molina, Manager**  
**Field Service Department**  
**Utility Trailer Manufacturing Company**

Telephone Number: **626-854-7215**

Fax Number: **626-965-5660**

Name and Title of Person who prepared this report.

**Blas Gonzalez**  
**Regional Field Service Manager**  
**Field Service Department**

Signed: 

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

<sup>3</sup> Each manufacturer must furnish a report, to the Associate Administrator for Safety Assurance, for each defect or noncompliance condition, which relates to motor vehicle safety.

This guide was developed from 49 CFR Part 573, "Defect and Noncompliance Reports" and also outlines information currently requested. Any questions please consult the complete Part 573 or contact Mr. Jon White at (202) 366-5227 or by FAX at (202) 366-7882.

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): UTILITY Model Years Involved: 2011 Model(s): as follows: Refrigerated and Dry Vans (Single axle, dual axle and tri-axle, commercial, semi refrigerated and dry vans)

Production Dates: Beginning: April 2010 Ending: July 2010

VIN Range: Beginning: 1UYVS2536BU083901 Ending: 1UYVS29BP138260

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

**Refrigerated Vans Manufactured with option: Meritor Suspension System w/Axles**

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 involved Widgets equipped with certain items of equipment from January 1, 1997, then what was the percentage of the recalled Widgets of all Widgets manufactured during that time period. 2.58 %

**II. Identify the Recall Population**

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

Model	Model Year	Number of Vehicles Potentially Involved
<u>VS2RA</u>	<u>2011</u>	<u>129</u>
<u>VS2DX</u>	<u>2011</u>	<u>60</u>

Total Number Potentially Affected by the Recall: 189

4. **Furnish the approximate percentage of the total number of vehicles estimated to actually contain the defect of noncompliance: .05%**

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:

**The axles were equipped with the suspension system, manufactured by ArvinMeritor. A record search was made of all trailers on which the suspension system were installed. All such trailers were identified as being manufactured between April 2010 – July 2010.**

### **III. Describe the Defect or Non Compliance**

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

**Arvin Meritor is recalling certain MPA trailer suspension systems installed as original equipment on various heavy duty trucks. The suspect system may have missing welds at the interface of the lower seat bracket and axle beam.**

**Also, see the attached notices and inspection / installation instructions:**

- **Dealership Advisement Letter – SB-08-131 ArvinMeritor - Tech Bulletin – Safety Recall**
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- Describe the cause(s) of the defect:

**Refer to the ArvinMeritor Tech Bulletin – TP-10172, dated 09-10, attached.**

- Describe the consequence(s) of the defect or noncompliance condition:

**The defect could allow the axle to roll out of position and potentially impact the handling of the trailer, increasing the risk of a crash. Refer to NHTS Campaign ID No: 10E407000, attached.**

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

**NA**

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

**ARVINMERITOR, MERITOR HEAVY VEHICLE SYSTEM, LLC**  
**2135 WEST, MAPLE RAOD**  
**TROY, MI 48084**

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

**Mr. Nirav Parikh, Regional Quality Manager and Jeremy Tertzakian, Technical Manager**

#### **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 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.

**10/5/10: This department received notification by email and later by mail from ArvinMeritor of the recall. No known incidents had been reported to Utility.**

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.

**10/5/10: This department received notification by email and later by mail from ArvinMeritor of the recall. No known incidents had been reported to Utility.**

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

8. Furnish a description of the manufacturer's remedy for the defect of non-compliance. Clearly describe the difference between the recall condition and the remedy.

**ArvinMeritor has notified Utility. Utility is working with its independently owned Dealership Network to contact all owners of the affected suspension systems. The affected vehicles will be repaired free of charge by ArvinMeritor. The safety recall is expected to begin during October 2010. Owners may contact ArvinMeritor at 248-435-0896 or their primary Utility contact.**

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

**Refer to the ArvinMeritor Tech Bulletin – TP-10172, dated 09-10, 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.

**The remaining product inventory was inspected prior to departure. No repair was necessary.**

#### **VI. Identify the Recall Schedule**

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.

**Utility does not intend to send another notification to dealers or end users as this has already been completed. Utility continues to monitor the completion of this work. It is our intent to continue**

**monitoring until all identified trailers have been inspected and repaired if necessary. Utility does not foresee any problems with implementing the inspection and recall.**

## **VII. Furnish Recall Communications**

9. Furnish a final copy of all notices, bulletins, and other communications that relate directly to the defect of 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 document should be submitted to this office by Fax (202-366-7882) for review prior to mailing.*

Note that these documents are to be submitted separately from those provided in accordance with Part 573.8 requirements.