

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

vehicle safety)(a noncompliance motor vehicles listed below, an	icon Corporation [MFR] decided that (a defect which relates to motor with Federal Motor Vehicle Safety Standard No.) exists in the d is furnishing notification to the National Highway Traffic Safety with 49 CFR Part 573 <u>Defect and Noncompliance Responsibility and</u>
Date this report was prepared:	May 02, 2014
Furnish the manufacturer's ider	ntification code for this recall (if applicable): 14E-010
	ame of the fabricating manufacturer of the vehicle being recalled. If the ovide the name and mailing address of the designated agent as
Ricon Corporation, A Wabtec Con	npany
7900 Nelson Road, Panorama City	, CA 91402
Identify the corporate official, b	y name and title, whom the agency should contact with respect to this
Dennis Summers, Vice Presi	dent
Mobility Works	
Telephone Number: 330-861-1	118 Fax No. 330-861-0281
Name and Title of Person who	prepared this report.
-	Dennis Summers
-	Vice President

Signed:

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, or each make and model or applicable vehicle line (provide

illustrations or photographs as necessary to describe the vehicle), provide: Model Years Involved: 2013/2014 Model(s): E150 Make(s): **Ford** Production Dates: Beginning: 12/1/13 Ending: 1/4/14 VIN Range: Beginning: 1FTNE1EW1DDB32256 Ending: 1FTNS1EW7EDA22435 Vehicle Type: E-Series Bodystyle: VAN ————— Descriptive information which characterizes/distinguishes the recalled vehicles from those model vehicles not included in the recall: Make(s): Ford Model Years Involved: 2013/2014 Model(s): E250 Production Dates: Beginning: 12/1/13 Ending: 1/4/14 VIN Range: Beginning: 1FTNS2EW0DDA44247 Ending: 1FTNS2EW0DDA63669 Vehicle Type: E-Series___Bodystyle: VAN_____ Descriptive information which characterizes/distinguishes the recalled vehicles from those model vehicles not included in the recall: Make(s): Model Years Involved: Model(s): Production Dates: Beginning: ____ Ending: ____ Ending: — VIN Range: Beginning: 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.

Il. Identify the Recall Population

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

		Number of Vehicles
Model	Year	Potentially Involved
E150	2013	2
E150	2014	2
E250	2013	10
-12		
Total Number Potentially	Affected by the Recall:	

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:

<u>Population determined based on identified Serial #'s of Ricon "S" and "K" series lifts installed in Mobility Works</u> altered Ford E-Series vans.

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. Ricon public use "S" and "K" series lifts equipped with an armored pendant cable. Ricon recalls 14E-010.

Ricon Corporation, A Wabtec Company

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

The affected lifts are equipped with a hand held pendant control where upon the cord is protected by a flexible, steel conduit (an armored pendant cable) and an external power lug at the base of the hydraulic pump. In the event the lift is installed such that the armored pendant cable is not managed to be kept clear of the wheelchair lift and the protective, elastomeric cover is either omitted or improperly installed, the armored pendant cable may contact the power lug resulting in a high current short circuit and the possibility of fire. Failure to install the pendant cable such that it is kept clear of the wheelchair lift base combined with an improperly installed or omitted protective elastomeric boot.

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

If the aforementioned short circuit occurs and it is not removed within a few seconds, a vehicle fire may result in placing vehicle occupants at risk.

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

Sparks at the base of the lift power pack, rapid heating of the armored pendant cable, wisps of smoke, strong smell of burnt plastic.

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 Wabtec Company
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Identify the name and title of the chief executive officer or knowledgeable representative of the supplier: Stanton D. Saucier, PE

Vice President - Marketing and Product Planning

IV. Provide the Chronology in Determining the Defect/Noncompliance

If the recall isfor 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.

Ricon Corporation issued a recall based on two	
not associated with MobilityWorks. MobilityWany failures.	vorks has no reports of

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 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.
- 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.

rill provide instructions for managing the pendant cord and will supply a supplemental cover kit and the responsibility of the lift owners to install the cover kit.	<u>at no</u>

	Ricon will supply a supplemental power lug elastomeric cover kir cover kit prevents contact with power lug.	t. The
•	describe how and when the recall condition was corrected in product dentical to the recall remedy in the field, so state. If the product	
Re	medy is identical to recall remedy.	

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.

Mobility works will provide owner and purchaser notifications subsequent to NHTSA approval of submitted 573 Defect and Non-Compliance Report. Mobility Works anticipates the recall campaign will begin May 12, 2014. Customers will be notified of their responsibilities in coordinating the campaign and making remedies by the end of

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@Aot.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.