



# SERVICE BULLETIN

## Vermeer Corporation

Environmental  
Pella, IA 50219 USA

**FIELD CAMPAIGN  
SERVICE BULLETIN #**

**SVC2016-129**

**DATE: 14 October 2016**

**CAMPAIGN  
TYPE:**

**Mandatory-Product Safety**

**CAMPAIGN  
CATEGORY:**

**Kit and Bulletin**

| MACHINE /<br>ATTACHMENT<br>MODEL (S) : | Serial Numbers           |                                                                      |             |
|----------------------------------------|--------------------------|----------------------------------------------------------------------|-------------|
|                                        | Included                 | Excluded                                                             | Kit Version |
| DT6                                    | 108 – 121                | 118, 120, 121                                                        | IK01        |
| HG4000                                 | 152 – 205, 1001 – 1034   | 154–157, 161–163, 169, 173,<br>174, 176, 186–204, 1029,<br>1032–1034 | IK01        |
| HG6000                                 | 1068 – 1101              | 1071, 1100, 1101                                                     | IK01        |
| HG8000                                 | 120 – 125                | None                                                                 | IK01        |
| TG5000                                 | 184 – 201, 1001 – 1014   | 193, 1008–1010, 1013, 1014                                           | IK01        |
| TG7000                                 | 1016 – 1041              | 1035, 1039, 1041                                                     | IK01        |
| TG9000                                 | 204 – 208                | None                                                                 | IK01        |
| WC2300XL                               | 1038 – 1060, 2001 – 2024 | 2006, 2019, 2021–2024                                                | IK01        |
| WC2500XL                               | 100 – 101                | None                                                                 | IK01        |

**Subject:**



**PRODUCT  
SAFETY  
RECALL**

**FIRST NOTICE**

**Bendix SR-5 Spring  
Brake Valve Update Kit  
(IK00-3350)**

**Background:**

**SLOW APPLICATION OF SPRING BRAKES WHEN PARKING THE TRAILER**

Under a combination of a unique set of circumstances, it is possible (though not probable) for an internal leakage to develop in the SR-5 brake valve unit, resulting in slow to apply spring brakes when parking the trailer. The leak is heard or observed at the supply (red) glad-hand when uncoupled from the tractor. If coupled to a tractor, a

leak may be heard from the exhaust of the park control valve (Bendix ® MV-3™ dash control valve) or from the tractor protection valve.

If uncoupled, and the internal leakage presents itself, loss of air pressure in the trailer reservoir will result. If a high rate of leakage is observed from the supply glad-hand or park control valve exhaust (as noted above), it is possible that the spring brakes will be slow to apply on the trailer. **Note:** *This issue presents no impact on the tractor brakes.*

#### **DEATH OR SERIOUS INJURY POSSIBLE**

Death or serious injury is possible if crushed or run over by the trailer if it rolls away after being uncoupled from the tractor or tow vehicle.

#### **Solution:**

#### **IMMEDIATE MACHINE MODIFICATIONS REQUIRED**

IK00-3350 has been created to provide the necessary parts and instructions to install a check valve cartridge. **This kit must be installed as soon as possible.**

Please be reminded that it is a violation of Federal law for you to sell or lease the machines covered by this notification until this recall has been performed on these machines. Substantial civil penalties apply to violations of this law.

#### **DEALER PARTICIPATION**

##### **REVIEW REPORT, ORDER KITS, CONTACT CUSTOMERS**

1. **Reports will be emailed** during the week of October 14, 2016, to dealerships shown in our records which have units in their territory affected by this Alert. Please review the report for accuracy, including owner and/or address changes.

If the information contained in the report is NOT correct, please notify the Product Safety Department on or before October 27, 2016 at:

Telephone: 641-621-7060

Fax: 641-621-7739

Email: [productsafety@vermeer.com](mailto:productsafety@vermeer.com)

2. **Dealership Order Kits** by entering the order into iParts.
  - a. Each dealership should determine the quantity of Kits to order initially depending upon the number of units that may be available for immediate upgrade. **Do not order more Kits than needed for immediate installation.**
  - b. Product Safety kits launched after May 1, 2016 no longer require the 17-digit VIN of the unit, or need to be ordered under the order type FSAF, SSAF, ESAF. Please order this kit under the order type STKP, FILL, WAR or other "Normal" order types as appropriate.
3. **Contact your affected customer(s)** to schedule a mutually acceptable time to upgrade their machine. **Note:** Letters will be sent to the customer(s) on or about **October 28, 2016**. *Also refer to Owner Notification section below.*

If you have any questions concerning the installation of IK00-3350, please contact the Environmental Service Department.

## REIMBURSEMENT

Upon completion of each Kit installation, a Warranty Claim must be submitted to the Corporate Warranty Department for reimbursement of the cost of the Kit. The Work Completion Certificate indicating that the Kit was installed must also be submitted. Both documents (Claim and Work Completion Certificate) must be received prior to reimbursement of the parts or labor for this Product Safety Alert.

For those dealers submitting warranty claims via iWarranty, please submit a campaign claim with the Work Completion Certificate attached to the claim.

A Work Completion Certificate is attached below which indicates the labor hours.

**Note:** Future notices to dealers and owners are dependent upon the receipt of Work Completion Certificates by Product Safety Department.

## OWNER NOTIFICATION

**Sample Letter:** Included at the end of this Bulletin is a sample letter which will be sent by Vermeer Corporation directly to the Owners on or about **October 28, 2016**, via USPS certified/registered mail.

|           |                        |              |
|-----------|------------------------|--------------|
| • Arabic  | • Brazilian Portuguese | • Chinese    |
| • Dutch   | • Finnish              | • French     |
| • German  | • Japanese             | • Italian    |
| • Malay   | • Polish               | • Portuguese |
| • Spanish | • Swedish              |              |

All translated owner notices will also include English owner notification.

This owner notification/letter instructs the owner **to contact their local dealership** to arrange for a time to have the Kit installed. After receiving IK00-3350 from the Parts Center, you must contact your affected customer(s) immediately and schedule a mutually acceptable time to upgrade their machine.

We regret any inconvenience that these corrective measures may cause you. This required work is for safety of the operator, crew members and others that could be in close proximity when the unit is parked. We hope you agree that the safety benefits surpass the inconvenience.

## PRODUCT SAFETY DEPARTMENT

### Attachment:

IK00-3350 Kit Instructions

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>Completion Schedule:</b><br><input checked="" type="checkbox"/> <b>Product Safety Alert: Install immediately</b><br><input type="checkbox"/> <b>90 days from date of this Bulletin</b><br><input type="checkbox"/> <b>180 days from date of this Bulletin</b><br><input type="checkbox"/> <b>1 year from date of this Bulletin</b><br><input type="checkbox"/> <b>Only Units within Standard Limited Warranty Period</b><br><input type="checkbox"/> <b>N/A</b> | <b>Reimbursement:</b><br><input checked="" type="checkbox"/> <b>Product Safety Alert:</b><br><b>Work Completion Certificate Required</b><br><input checked="" type="checkbox"/> <b>All Units Listed Above</b><br><input checked="" type="checkbox"/> <b>Parts</b> <input checked="" type="checkbox"/> <b>Labor Paid (Labor Code: SB16 )</b><br><input type="checkbox"/> <b>Only Units within Standard Limited Warranty Period</b><br><input type="checkbox"/> <b>No Reimbursement</b> |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|

|                                                                                              |                                     |    |                                 |                          |    |                   |
|----------------------------------------------------------------------------------------------|-------------------------------------|----|---------------------------------|--------------------------|----|-------------------|
| <b>Internal Reference:</b><br><b>TREAD Act Code</b><br>(Choose one or more codes applicable) | <input type="checkbox"/>            | -- | Not Applicable                  | <input type="checkbox"/> | 12 | Exterior lighting |
|                                                                                              | <input type="checkbox"/>            | 02 | Suspension                      | <input type="checkbox"/> | 16 | Structure         |
|                                                                                              | <input type="checkbox"/>            | 03 | Service brake system, hydraulic | <input type="checkbox"/> | 17 | Latch             |
|                                                                                              | <input type="checkbox"/>            | 04 | Service brake system, air       | <input type="checkbox"/> | 19 | Tires             |
|                                                                                              | <input checked="" type="checkbox"/> | 05 | Parking brake                   | <input type="checkbox"/> | 20 | Wheels            |
|                                                                                              | <input type="checkbox"/>            | 11 | Electrical                      | <input type="checkbox"/> | 21 | Trailer hitch     |

**Return completed Work Completion Certificate for labor credit to:**  
**Product Safety Department: ATTACH to iWarranty Campaign Claim**  
**FAX: 641-621-7739**  
**EMAIL: productsafety@vermeer.com**

|                                                                                                                                                                                                                                                       |                                 |                                                             |                                   |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------|-------------------------------------------------------------|-----------------------------------|
| <b>WORK COMPLETION CERTIFICATE</b><br><b>IK00-3350: Bendix SR-5 Spring Brake Valve Update Kit</b><br><b>First Notice</b>                                                                                                                              |                                 | <i>For Dealer Use:</i><br><i>Warranty Claim</i><br><i>#</i> |                                   |
| 17-Digit Serial Number is required                                                                                                                                                                                                                    |                                 |                                                             |                                   |
| <input type="checkbox"/> DT6                                                                                                                                                                                                                          | <input type="checkbox"/> HG6000 | <input type="checkbox"/> TG5000                             | <input type="checkbox"/> TG9000   |
| <input type="checkbox"/> HG4000                                                                                                                                                                                                                       | <input type="checkbox"/> HG8000 | <input type="checkbox"/> TG7000                             | <input type="checkbox"/> WC2300XL |
| <div style="border: 1px solid black; height: 20px; width: 100%;"></div>                                                                                                                                                                               |                                 |                                                             |                                   |
| I have properly installed the parts according to the Kit's written instructions and am returning this Certificate with the understanding that the Installer's Company will receive <b>0.7 hours</b> reimbursement for labor from Vermeer Corporation. |                                 |                                                             |                                   |
| Date Work Completed:                                                                                                                                                                                                                                  |                                 |                                                             |                                   |
| Work Completed By:                                                                                                                                                                                                                                    |                                 |                                                             |                                   |
| (Enter Installer's Name, Company's Name & Address)                                                                                                                                                                                                    |                                 |                                                             |                                   |
|                                                                                                                                                                                                                                                       |                                 |                                                             |                                   |
|                                                                                                                                                                                                                                                       |                                 |                                                             |                                   |
| Installer's Signature:                                                                                                                                                                                                                                |                                 | X                                                           | Phone #:                          |
| (Name of Installer's Company, Address, and Signature Required)                                                                                                                                                                                        |                                 |                                                             |                                   |
| Unit Owner's Name:                                                                                                                                                                                                                                    |                                 |                                                             |                                   |
| Unit Owner's Address:                                                                                                                                                                                                                                 |                                 |                                                             |                                   |
|                                                                                                                                                                                                                                                       |                                 |                                                             |                                   |
|                                                                                                                                                                                                                                                       |                                 |                                                             |                                   |
| (Name of Owner's Company and Address)                                                                                                                                                                                                                 |                                 |                                                             |                                   |

# Sample Owner Letter

October 28, 2016

VIA USPS CERTIFIED/REGISTERED MAIL

Dear «MODEL» Owner:

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

Vermeer has decided that a defect, that relates to motor vehicle safety, exists in certain model year 2014-2016 Vermeer «MODEL».

## **SLOW APPLICATION OF SPRING BRAKES WHEN PARKING THE TRAILER**

Under a combination of a unique set of circumstances, it is possible (though not probable) for an internal leakage to develop in the SR-5 brake valve unit, resulting in slow to apply spring brakes when parking the trailer. The leak is heard or observed at the supply (red) glad-hand when uncoupled from the tractor. If coupled to a tractor, a leak may be heard from the exhaust of the park control valve (Bendix ® MV-3™ dash control valve) or from the tractor protection valve.

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## **DEATH OR SERIOUS INJURY POSSIBLE**

Death or serious injury is possible if crushed or run over by the trailer if it rolls away after being decoupled from the tractor or tow vehicle.

## **IMMEDIATE MACHINE MODIFICATIONS REQUIRED**

IK00-3350 has been created to provide the necessary parts and instructions to install a check valve cartridge. **This kit must be installed as soon as possible.**

**Please contact** your authorized, independent **Vermeer dealer** immediately to arrange a mutually acceptable time and location to install IK00-3350 **at no cost** to you for labor or materials. The installation of this kit is estimated at 0.7 hours of labor. If the Vermeer dealer travels to the unit to install the kit, costs may be incurred by the owner. **You must have your machine upgraded for these safety features.**

|                                           |                                                                                                                                                  |
|-------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>Contact your local Vermeer Dealer:</b> | «Service_Dealer_Name»<br>«Serv_Dealer_Add1» «Serv_Dealer_Add2»<br>«Serv_Dealer_City» «Serv_Dealer_St» «Serv_Dealer_Zip»<br>«SERV_DEALER_COUNTRY» |
| <b>Telephone:</b>                         | «Serv_Dealer_Phone»                                                                                                                              |



## **IMPORTANT SAFETY RECALL**

**First Notice**  
**Bendix SR-5 Spring Brake  
Valve Update Kit  
(IK00-3350)**

**Model:** «Model»  
This notice applies to your vehicle,  
**Serial No:** «VIN»

According to our records, you currently own a Vermeer «MODEL» Trailer/Horizontal Grinder/Tub Grinder/Brush Chipper. The Model and Serial Number of the «MODEL» is shown at the top right of this letter. If you no longer own this unit, please notify the Product Safety Department at:

Toll Free: 800-829-0051, extension 7060

Telephone: 641-621-7060

E-mail: [productsafety@vermeer.com](mailto:productsafety@vermeer.com)

If possible, please provide the name and address of the new owner.

We regret any inconvenience that these corrective measures may cause you. The required work is for the safety of the operator, crew members and others that could be in close proximity when the unit is parked. We hope that you agree that the safety benefits surpass the inconvenience.

Very truly yours,

**PRODUCT SAFETY DEPARTMENT**

*Federal regulations require that any vehicle lessor receiving this recall notice must forward a copy of this notice to the lessee within ten (10) days.*

If the authorized dealer has failed or is unable to remedy the defect without charge and within a reasonable time, contact Vermeer Product Safety by email at [productsafety@vermeer.com](mailto:productsafety@vermeer.com) or by calling 800-829-0051 or 641-621-7060. You may also submit a complaint to the Administrator, National Highway Traffic Safety Administration, 1200 New Jersey Avenue SE, Washington, D.C. 20590 or call the Vehicle Safety Hotline at 888-327-4236 (TTY: 1-800-424-9153); or go to <http://www.safercar.gov>