

## IMPORTANT SAFETY RECALL (#19V511)

THIS NOTICE APPLIES TO YOUR VEHICLE(S) – SEE VIN(S) IN ANNEX

Saint-Eustache, August 30, 2019



This Notice is sent to you in accordance with the of the National Traffic and Motor Vehicle Safety Act.

Nova Bus has decided that a defect which relates to motor vehicle safety exists in certain Nova LFS vehicles equipped with cantilever seats.

On these vehicles the hardware used to secure some of the seats was not properly tightened. This could cause the hardware or seat rail to fail. As a result, the seat could drop to the floor. Seats that are not secured could create a risk of injury for passengers.

Vehicles affected by this notification can be identified by their vehicle identification number (VIN). A list of the affected VINs is annexed at the end of this document.

For vehicles targeted by this recall, Nova Bus proposes to inspect and replace the seat rails and hardware. Nova Bus will release a document (CR4663E), explaining the inspection and replacement procedure. This document is available to you on our website at <http://www.novabus.com/on-line-services.html>. The necessary replacement parts are available via the Prevost Parts distribution network. Nova Bus will assume the entire cost of the parts, including the labor. The inspection should take approximately 20 minutes to complete and if necessary the repair should take 3 hours to complete. If you have previously paid for repairs as a result of this issue, you may be entitled to recovery of those expenses. Submit copies of all documentation supporting your claim according to the rules specified in the "General Plan for Reimbursement of Pre-notification Remedies" provided in this mailing under the heading "Annex A."

Federal regulations require that any vehicle lessor receiving this recall notice must forward a copy of this notice to the lessee within ten days. If you have any questions regarding the requirements of this campaign, please contact your local customer support manager.

After contacting your customer support manager, if you are still not able to have the safety defect remedied without charge and within reasonable time, you may wish to write the Administrator, National Highway Traffic Safety Administration, 1200 New Jersey Avenue, SE, Washington, DC 20590, call 1-888-327-4236 (TTY: 1-800-424-9153), or go to <http://www.safercar.gov>.

Sincerely,

Guy French  
Vice President, Aftermarket Customer Care

## ANNEX A

### General Plan for Reimbursement of Pre-Notification Remedies

When a Nova Bus vehicle is affected by a safety recall campaign and the owner (claimant) has the problem corrected at their own expense prior to receiving notification of the recall, Nova Bus will reimburse the claimant for the reasonable amount paid for repairs (i.e. the cost of parts, labor, disposal fees and taxes) that addressed the defect as stated in the safety recall notification. **To qualify, repairs must have been completed no earlier than one year prior to the release of the recall (notification to the government) and no later than 10 days after the last mailing of the initial customer notification letter pertaining to the recall.** The following information is required for your claim to be processed. Please print legibly.

**Date:** \_\_\_\_\_ **Recall #:** \_\_\_\_\_ **17 digit VIN:** \_\_\_\_\_

**Owner's Name:** \_\_\_\_\_ **Own/Lease (circle one)**

**Address:** \_\_\_\_\_ **Date of Repair:** \_\_\_\_\_

**City, State, Zip:** \_\_\_\_\_ **Amount Requested:** \_\_\_\_\_

**Phone #:** \_\_\_\_\_ **Email:** \_\_\_\_\_

**All claims MUST be accompanied by accurate and complete documentation** (the invoice/receipt must provide the VIN, date of repairs, total amount paid and include a breakdown of the parts, labor, and other costs. Costs associated with the recall repair must be highlighted or circled on the invoice).

I CERTIFY THAT I PAID FOR REPAIRS THAT CORRECTED THE SAFETY DEFECT AS STATED IN THE RECALL LETTER PRIOR TO BEING NOTIFIED. I ALSO CERTIFY THAT I HAVE PROVIDED CLEAR DOCUMENTATION OF THESE REPAIRS AND THAT ALL INFORMATION PROVIDED IS COMPLETE AND ACCURATE TO THE BEST OF MY KNOWLEDGE.

**Claimant**

**Witnessed by (required)**

\_\_\_\_\_  
Authorized Signature and Date

\_\_\_\_\_  
Notary Signature and Date

\_\_\_\_\_  
Affix Notary Stamp

#### Contact Information

Submit copies of all documentation supporting your claim to:

Nova Bus Warranty, TMAC  
850, chemin Olivier  
Saint-Nicolas (QC) G7A 2N1  
Canada  
Email: [adm.novabus.warranty@volvo.com](mailto:adm.novabus.warranty@volvo.com)

**Allow 60 days for processing. Nova Bus is not responsible for claims submitted to the wrong address.**

Nova Bus will consider all claims, but may deny a claim, in whole or in part, for any of the following reasons:

- Fraudulent claim or vehicle not part of recall
- Incomplete application or support documentation
- The repair did not address the safety defect or non-compliance that led to the recall, or the repair was not of the same type (repair, replacement) as the recall remedy.

**This process is NOT intended to handle accident or property damage claims. Claims of that nature MUST be directed to our legal department at 35, Gagnon Blvd, Sainte-Claire (QC), Canada, G0R 2V0.**

**ANNEX VIN**