

Safety Defect and Noncompliance Report Guide for Equipment
PART 573 Defect and Noncompliance Report¹

On JUNE 23, 2008, RICON [MFR] decided that (a defect which relates to motor vehicle safety)(a noncompliance with Federal Motor Vehicle Safety Standard No. 403) exists in items of motor vehicle equipment 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: 10/3/08

Furnish the manufacturer's identification code for this recall (if applicable): #07E-097

1. Identify the full corporate name of the fabricating manufacturer/brand name/trademark owner of the recalled item of equipment. If the recalled item of equipment is imported, provide the name and mailing address of the designated agent as prescribed by 49 U.S.C. §30164.

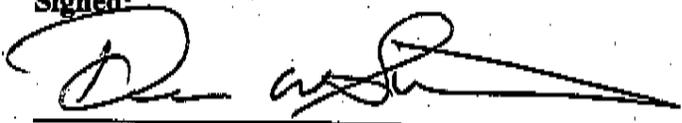
WMK INC., dba MobilityWORKS
1090 W. WILBETH ROAD
AKRON, OHIO 44314

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

DENNIS SUMMERS
VICE PRESIDENT - OPERATIONS

Telephone Number: 800-769-8267 Fax No.: 330-861-0283

Name and Title of Person who prepared this report.
DENNIS SUMMERS
VICE PRESIDENT - OPERATIONS

Signed: 

¹Each 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 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 E-Mail to RMD.ODI@dot.gov.

RECEIVED
2008 OCT-6 10:35 AM
DEFECTS INVESTIGATION
RECALL MGMT DIV.

I. Identify the Recalled Items of Equipment

2. Identify the Items of Equipment Involved in this Recall, for each make and model or applicable item of equipment product line (provide illustrations or photographs as necessary to describe the item of equipment), provide:

Generic name of the item: Vehicle

Make: FORD Model: E250

Part Number: RICON LIFT Size: 34" X 54"

Function: WHEELCHAIR LIFT

Other information which characterizes/distinguishes the items of equipment to be recalled:

LIFT MODEL YEARS 04/01/05 - 09/06/06

Make: FORD Model: E350

Part Number: RICON LIFT Size: 34" X 54"

Function: WHEELCHAIR LIFT

Other information which characterizes/distinguishes the items of equipment to be recalled:

LIFT MODEL YEARS 04/01/05 - 09/06/06

Make: FORD Model: E450

Part Number: RICON LIFT Size: 34" X 54"

Function: WHEELCHAIR LIFT

Other information which characterizes/distinguishes the items of equipment to be recalled:

LIFT MODEL YEARS 04/01/05 - 09/06/06

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 Equipment equipped with certain items of equipment from January 1, 1996, through April 1, 1997, then what was the percentage of the recalled Equipment of all Equipment manufactured during that time period.

I. Identify the Recalled Items of Equipment

2. Identify the Items of Equipment Involved in this Recall, for each make and model or applicable item of equipment product line (provide illustrations or photographs as necessary to describe the item of equipment), provide:

Generic name of the item: Vehicle
Make: GMC Model: 2500
Part Number: Ricon LIFT Size: 34" X 54"
Function: WHEELCHAIR LIFT

Other information which characterizes/distinguishes the items of equipment to be recalled:
LIFT MODEL YEARS 04/01/05 - 09/06/06

Make: GMC Model: 3500
Part Number: Ricon LIFT Size: 34" X 54"
Function: WHEELCHAIR LIFT

Other information which characterizes/distinguishes the items of equipment to be recalled:
LIFT MODEL YEARS 04/01/05 - 09/06/06

Make: Dodge Model: SPRINTER (2500)
Part Number: Ricon LIFT Size: 34" X 54"
Function: WHEELCHAIR LIFT

Other information which characterizes/distinguishes the items of equipment to be recalled:
LIFT MODEL YEARS 04/01/05 - 09/06/06

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 Equipment equipped with certain items of equipment from January 1, 1996, through April 1, 1997, then what was the percentage of the recalled Equipment of all Equipment manufactured during that time period.

II. Identifying the Recall Population

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

	<u>Model</u>	<u>Year</u>	<u>Number of Items Potentially Involved</u>
Ford	E250	2005, 2006	75
	E350	2000, 2004, 2005, 2006	50
	E450	2000, 2005	2
GMC	2500	2005, 2006	2
	3500	2005, 2006	2
Dodge	2500	2006	2

Total Number Potentially Affected by the Recall: 133

4. Furnish the approximate percentage of the total number of items of equipment 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 items of equipment: NHTSA COMPLIANCE TEST

REPORT # 638657A AND NHTSA 2007-28140
FORMED THE BASIS FOR RICON CORPORATION'S
DETERMINATION OF NON COMPLIANCE.

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.

Non-compliance with 56.10.2.3 of FMVSS 403 is the Result of the Anti-stow INTERLOCK SYSTEM NOT DETECTING the presence of A 50th test weight.

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

ADJUSTMENT to Anti-stow pressure switch.

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

LIFT PLATFORM will begin stowing while A wheelchair OR mobility Aid user is still occupying the AREA of the PLATFORM CLOSE to the pivot point of the PLATFORM.

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

LIFT will begin stowing tilting UPWARD ON the OUTWARD END CAUSING OCCUPANTS to lean TOWARD the INSIDE OF the vehicle.

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 Division of VAPOR BUS INTERNATIONAL.
7900 NELSON ROAD
PANORAMA CITY, CA 91402

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

OSCAR PARDINAS
VICE PRESIDENT SALES AND MARKETING

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 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 ATTACHED Ricoh LETTER DATED 11/2/07.

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.

Refer to ATTACHED Ricoh LETTER DATED
11/2/07.

V. Identify the Remedy

8. 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 ATTACHED Ricoh LETTER DATED
11/2/07.

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

Refer to ATTACHED Ricoh LETTER DATED
11/2/07.

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 Attached Ricco Letter dated
11/2/07.

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.

- ① Schedule - INVESTIGATE ALL CUSTOMER FILES FROM
4/1/05 - 9/6/06 TO CONFIRM VEHICLES
CONTAINING IDENTIFIED RECALL LIFTS. RESEARCH
SHIPMENTS AFTER 9/6/06 TO IDENTIFY ALL CAS,
BEGIN PROCESS → 9/17/08 ; END PROCESS → 10/17/08.
- ② MAIL NOTIFICATION LETTER TO CUSTOMERS
BEGIN PROCESS → 10/20/08 ; END PROCESS → 10/24/08.

VII. Furnish Recall Communications

- ③ Problems - MANUAL SEARCH OF RECORDS (OVER 1,000).

9. 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) for review prior to mailing.

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



Ricon Corporation
A Division of Vapor Bus International
7900 Nelson Road
Panorama City, CA 91402

Phone: 818.267.3000
Fax: 818.267.3001
www.Wabtec.com

07E-097
(8 pages)

November 2, 2007

RECEIVED
2007 NOVEMBER 7 9:00A
DEFECTS INVESTIGATION
RECALL MGMT DIV.

Mr. Dan Smith
Associate Administrator for Enforcement
NHTSA - 215
1200 New Jersey Ave., SE
Washington D.C. 20590

Subject: Part 573 Defect and Noncompliance Responsibility Report – Anti-stow interlock
Reference: FMVSS 403 compliant Ricon S & K-series Public and Private Use Lifts

Dear Sir:

On November 1, 2007, Ricon Corporation determined that a noncompliance with Federal Motor Vehicle Safety Standard 403 exists in items of motor vehicle equipment listed below, and is furnishing notification to the National Highway Traffic Safety Administration in accordance with 49 CFR Part 573 – Defect and Noncompliance Reports.

This report was prepared on November 1, 2007

1. The full corporate name of the fabricating manufacturer is:

Ricon Corporation
A Division of Vapor Bus International
7900 Nelson Road
Panorama City, CA 91402

The corporate officials that the agency should contact with respect to this recall are:

Stanton Saucier
General Manager
ssaucier@wabtec.com
Phone 818 267-3016
Fax 818 267-3187

William Hinze
Director - Marketing
whinze@wabtec.com
Phone 818 267-3012
Fax 818 267-3139

Sincerely,

William Hinze
Director of Marketing



Ricon Corporation
A Division of Vapor Bus International
7900 Nelson Road
Panorama City, CA 91402

Phone: 818.267.3000
Fax: 818.267.3001
www.Wabtec.com

Ricon Corporation
Part 573 Defect and Noncompliance Responsibility Report
Anti-stow interlock – (S6.10.2.3)

I. Identify the Recalled Items of Equipment

2. Identify the Items of Equipment Involved in this Recall:

- a. This recall applies to the Anti-stow interlock that is used on Ricon's platform style wheelchair lifts.
- b. There are two Model names for these platform lifts, which includes FMVSS 403 Public and Private Use applications:

- (1) "S" Series
- (2) "K" Series

- c. The model numbers for the "S" Series lifts are:

S1200
S2003
S2005
S2010
S5503
S5505
S5510

- d. The model numbers for the "K" Series lifts are:

K1200
K2003
K2005
K2010
K5503
K5505
K5510



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7900 Nelson Road
Panorama City, CA 91402

Phone: 818.267.3000
Fax: 818.267.3001
www.Wabtec.com

II. Identify the Recall Population

- 3. Identify the Recall Population:** Lifts manufactured between April 1, 2005 and September 6, 2006 inclusive.
- 4. Approximate percentage of total wheelchair lifts estimated to actually contain the defect or noncompliance:** 100%

III. Describe the Defect or Noncompliance

- 5. Describe the noncompliance:** The Anti-stow interlock may not detect the presence of the 50 pound test weight when the weight is located close to the pivot point for the platform in accordance with test procedures in S7 of FMVSS 403.

Describe the cause(s) of the noncompliance: The pressure sensing switch that detects the presence of weight on the platform was not adjusted to the necessary sensitivity level.

Describe the consequence(s) of the noncompliance: The platform could stow even though an object was still occupying the area of the platform close to the pivot point of the platform.

Identify any warning which can (a) precede or (b) occur: The lift platform will begin to tilt upward on the outboard end causing the occupant to lean toward the inside of the vehicle.

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

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

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.** N/A



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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.**

NHTSA Compliance Test Report # 638657A and NHTSA -2007-28140 Notice 1 formed the basis for Ricon Corporation's determination of noncompliance. There have been no claims, accidents, injuries or fatalities associated with this noncompliance.

V. Identify the Remedy

8. **Furnish a description of the manufacturer's remedy for the defect or noncompliance. Clearly describe the differences between the recall condition and the remedy.**

Adjust sensitivity of the anti-stow pressure switch mounted on the hydraulic pump to a position that causes the platform to exhibit 5-6 pulses during the stowing cycle. A pulse is characterized by a momentary hesitation in movement of the platform. Lifts subject to this recall will exhibit 1-2 pulses only.

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

Not Applicable, no parts are required.

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 recall condition was corrected in production on all lifts manufactured after September 6, 2006 by making the proper adjustment to the pressure switch.

VI. Identify the Recall Schedule

Furnish a schedule or agenda (with specific dates) for notification to other manufacturers, dealers/retailer, and purchasers. Please identify any foreseeable problems with implementing the recall.



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A Division of Vapor Bus International
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Panorama City, CA 91402

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Fax: 818.267.3001
www.Wabtec.com

Ricon Corporation anticipates the recall campaign will begin December 31, 2007. At that time, manufacturers and dealers will be notified of their responsibilities in coordinating the campaign and making remedies to the recall population.

VII. Furnish Recall Communications

- 9. Furnish Recall Communications:** Attached for NHTSA review and approval.



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A Division of Vapor Bus International
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Panorama City, CA 91402

Phone: 818.267.3000
Fax: 818.267.3001
www.Wabtec.com

June 23, 2008

Mr. Recall Manager
ABC Corporation
123 Main Street
Anytown, USA

RE: Equipment Safety Standard Non-Compliance Notification - #07E-097

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

Dear Recall Manager,

Ricon Corp. needs your assistance in notifying your customers about a recall of certain wheelchair lift products built between April 1, 2005 and September 6, 2006 inclusive. Ricon Corporation has determined that a safety related non-compliance with S6.10.2.3 of the FMVSS 403 exists in public and private use wheelchair lifts manufactured by Ricon on the above dates.

YOU MUST NOTIFY NHTSA AND CONDUCT A SAFETY RECALL: According to our records, affected units were installed as original equipment on vehicles at your facility. You must notify the National Highway Traffic Safety Administration (NHTSA) and conduct a safety recall of those vehicles. It is critical that the National Highway Traffic Safety Administration NHTSA guidelines are followed in a timely manner and that your customers are notified to discontinue the use of the Wheelchair Lift until they schedule a time for you to repair the vehicle. You may contact the NHTSA with questions by sending an email to rmd.odi@dot.gov.

To help you comply with your obligation to issue a safety recall of the vehicles that contain an affected Wheelchair Lift, we have attached samples of a dealer service bulletin and a sample letter to owners of potentially affected vehicles, along with a corresponding owner reply form, which should facilitate your notification to dealers and owners of the recall and the required repairs and service procedures. Although we have provided these samples to you for your convenience, you **MUST** submit drafts of your version of these notices to NHTSA for approval at least 5 days prior to mailing such notification to dealers and owners of potentially affected Wheelchair Lifts.

Important: Dealer notification by Certified Mail is required by Federal law for all safety recalls. Responsible dealership personnel should be instructed to sign for this Certified mail without hesitation as it contains urgent safety recall information. Notifications to owners of potentially



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7900 Nelson Road
Panorama City, CA 91402

Phone: 818.267.3000
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Adjustment Procedures

Note – Test weight dimensions are 6 x 6 x 12 inches

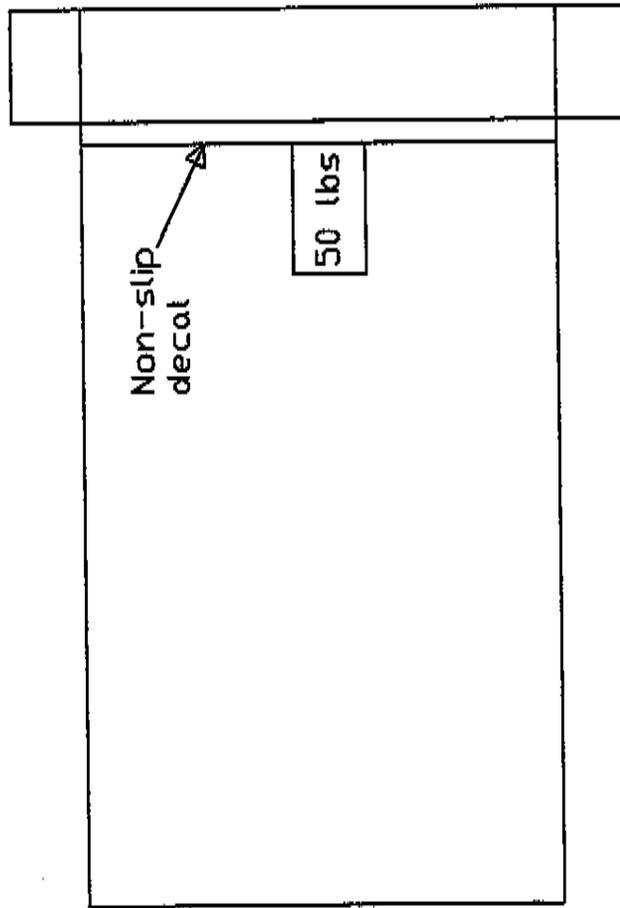
1. Park the vehicle in a safe location.
2. Open the lift door(s) and deploy the lift to the floor level position.
3. Place the 50lb test weight oriented lengthwise along the length of the platform and at the most inboard end of the platform operation volume. There is a non-skid decal on the platform that defines this location.
4. Depress the Stow button. Platform should not stow. If platform does not stow, the lift is properly adjusted. If platform stows with the test weight, continue with the following procedure:
 - a. Remove the pump cover and locate the anti-stow pressure switch.
 - b. Remove the “jam” set screw in the center of the switch and turn the adjusting set screw one half turn counterclockwise.
 - c. Place the test weight in the prescribed location.
 - d. Adjust pressure switch in the counterclockwise direction until such point where when the Stow function is depressed, the lift will not stow with the test weight in the prescribed location. It is good practice to adjust the switch 1/8-1/4 turn at a time.
 - e. Once pressure switch is set, replace the lock screw. Note – When tightening the lock screw, the adjustment screw may turn up to ¼ turn.
 - f. Re-test to make sure lift will not stow with test weight in prescribed location
 - g. Remove test weight
 - h. Depress the stow switch. Lift should stow with empty platform.

Note – Previous procedures relied on the number of “clicks” heard from the pump solenoid. It is normal for a properly adjusted lift to execute 15 or more “clicks”.

WHAT RICON CORPORATION WILL DO:

Upon notification from your end-user customer, Ricon will work with them to make the necessary adjustments to the pressure switch (es) on their lift (s). If the end-user is already factory trained to perform service on Ricon products, the adjustment can be done at the end-user's location. If the end-user is not factory trained to perform service on Ricon products, we will arrange for the adjustment to be done at the nearest Ricon authorized service center/dealer.

Placement of Test weight for Anti-Stow Interlock Adjustment - Recall 07E-097





Ricon Corporation
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7900 Nelson Road
Panorama City, CA 91402

Phone: 818.267.3000
Fax: 818.267.3001
www.Wabtec.com

The lift adjustments will be completed at no charge to the end-user. Whether the repairs are done by the end-user or an authorized Ricon Dealer, Ricon will pay a \$37.50 labor charge. No parts are necessary to correct this noncompliance.

If the lift is adjusted by an authorized Ricon dealer and it is not completed within 3 business days, please notify Ricon Customer Support at the toll free number listed above.

If, after contacting the authorized dealer and Ricon Customer Support, your inspection and/or repair is not completed in a reasonable time and without charge you may notify:

Associate Administrator for Enforcement
National Highway Traffic Safety Administration
1200 New Jersey Ave., SE
Washington, D. C. 20590
Phone (888) 327-4236

Ricon Corp. will take responsibility for compiling and submitting required "Quarterly Reports" to NHTSA covering end-user inspection or repairs upon receipt of the customer (end-user) contact information from each OEM.

Thank you for your prompt attention to this matter. If you have any questions concerning these procedures please contact Ricon's Customer Service at (800)322-2884 email me directly at OPardinas@Wabtec.com.

Sincerely,

A handwritten signature in black ink, appearing to be "OP", written over a horizontal line.

Oscar Pardinas
Vice President Sales and Marketing
Ricon Corp.

MOBILITYWORKS®

ADAPTIVE VEHICLES

MAKING THE WORLD ACCESSIBLE

September 16, 2008

Customer:
ABC Bus co.
123 Street
City, State, Zip Code

RE: Safety Standard Non-Compliance Recall Notification (#07E-097)

Dear Customer:

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

REASON FOR THIS RECALL

MobilityWorks has determined that a safety related noncompliance with S6.10.2.3 of the FMVSS 403 exists in public and private use wheelchair lifts manufactured by Ricon Corporation. This recall affects certain wheelchair lift products built between April 1, 2005 and September 9, 2006 installed in 2005 and 2006 E-Series Ford Vans.

WHAT WE WILL DO

Upon notification MobilityWorks will work in conjunction with Ricon Corporation to make the necessary adjustments to the pressure switch (es) on your lift (s). If you are already factory trained to perform service on Ricon products, the adjustments can be performed at your location. If you are not factory trained to perform service on Ricon products, we will arrange for the adjustment to be done at the nearest Ricon authorized service center/dealer.

The lift adjustments will be completed at no charge to the end-user. Whether the repairs are done by the end-user or an authorized Ricon Dealer, Ricon will pay a \$37.50 labor charge. No parts are necessary to correct this non-compliance.

1090 W. Wilbeth Road, Akron, OH 44314
(330) 861-1118- phone ◊ (800) 769-8267 - toll free ◊ (330) 861-0281 - fax

WHAT YOU SHOULD DO

Please contact Ricon customer service at (800) 322-2884 to determine if your lift is affected. Further information can be obtained by contacting www.riconcorp.com and clicking on "RICON BRIDGEPLATE SWITCH RECALL INFORMATION".

If you are an authorized Ricon repair agent, you should follow the procedures outlined below to perform modifications. If not, you should schedule your vehicle for services at your nearest Ricon authorized dealer:

Adjustment Procedures

Note – Test weight dimensions are 6 x 6 x 12 inches

- 1. Park the vehicle in a safe location.**
- 2. Open the lift door(s) and deploy the lift to the floor level position.**
- 3. Place the 50lb test weight oriented lengthwise along the length of the platform and the most inboard end of the platform operation volume. There is a non-skid decal on the platform that defines this location.**
- 4. Depress the Stow button. Platform should not stow. If platform does not stow, the lift is properly adjusted. If platform stows with the test weight, continue with the following procedure:**
 - a. Remove the pump cover and locate the anti-stow pressure switch.**
 - b. Remove the "jam" set screw in the center of the switch and turn the adjusting set screw one half turn counterclockwise.**
 - c. Place the test weight in the prescribed location.**
 - d. Adjust pressure switch in the counterclockwise direction until such point where when the Stow function is depressed, the lift will not stow with the test weight in the prescribed location. It is good practice to adjust the switch 1/8-1/4 turn at a time.**
 - e. Once pressure switch is set, replace the lock screw. Note – When tightening the lock screw, the adjustment screw may turn up to ¼ turn.**
 - f. Re-test to make sure lift will not stow with test weight in prescribed location.**
 - g. Remove test weight.**
 - h. Depress the stow switch. Lift should stow with empty platform.**

Note – Previous procedures relied on the number of "clicks" heard from the pump solenoid. It is normal for a properly adjusted lift to execute 15 or More "clicks".

Page 3 - Owner Recall (#07E-097)

If the lift is retrofitted by an authorized Ricon dealer and it is completed within 3 business days, please notify Ricon Customer support at the toll free number listed above.

If, after contacting the authorized dealer and Ricon Customer Support, your inspection and/or repair is not completed in a reasonable time and without charge you may notify:

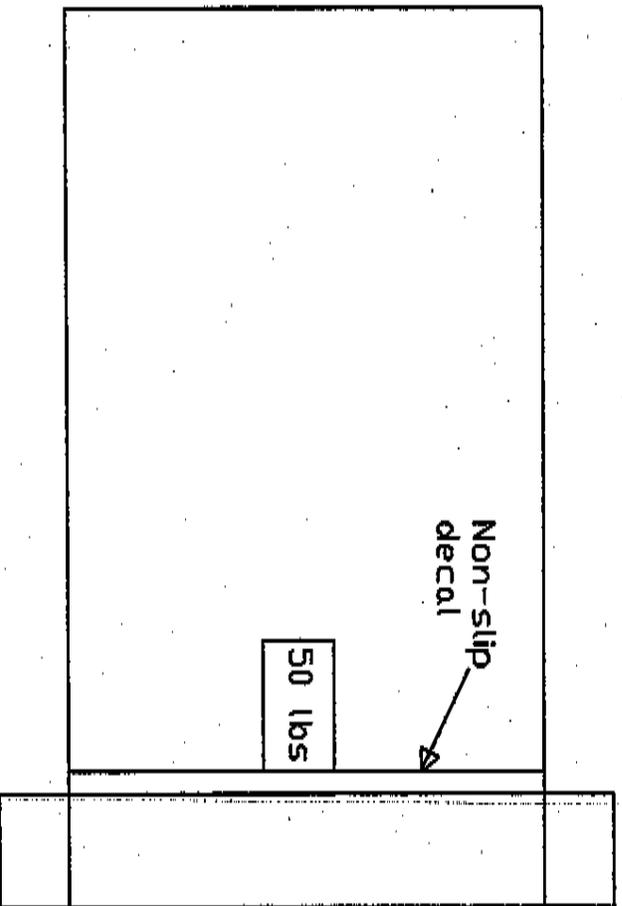
US-DOT – NHTSA
Office of Defects Investigation
Recall Management / W46-437
1200 New Jersey Ave., SE
Washington, D.C. 20590
Phone (202) 493-0481
Fax (202) 366-7882

If you have any questions concerning these procedures please contact Ricon Customer Service at (800) 322- 2884 or by email at OPardinas@Wabtec.com.

Sincerely,

Dennis Summers
Vice President Operations
MobilityWorks

Placement of Test weight for Anti-Stow Interlock Adjustment - Recall 07E-097



MW
EQUIPMENT
a division of MobilyWorks

1090 W. Wilbeth Rd.
Akron, OH 44314

Customer
ABC Bus Co.
123 Street
City State Zip

SAFETY RECALL
NOTICE
ENCLOSED