



Spartan Motors Chassis, Inc.
1000 Reynolds Road - Charlotte, MI - 48813

573 DEFECT & NONCOMPLIANCE REPORT

Description:	Center forward facing Non-All Belts to Seat (ABTS) seat belt anchorage design is non-compliant to FMVSS 210.
---------------------	--

Internal Code:	10005	Date of Report:	2/5/2010
-----------------------	-------	------------------------	----------

Submitted to: Associate Administrator for Safety Assurance
National Highway Traffic Safety Administration
1200 New Jersey Ave. SE
Washington, DC 20590

Attn: Mrs. Kelly Schuler, Office of Defects Investigation
Fax: (202) 366-7882
Email: RMD.ODI@dot.gov

Manufacturer Identification: Spartan Chassis, Inc.
1000 Reynolds Road
Charlotte, MI 48813

Telephone: (517) 543-6400

Corporate contacts for recall information:

Customer Notification / Customer Service:	Report prepared by:
Wes Redfield Campaign/Recall Coordinator Customer Service Operations (517) 543-6400, ext. 3237 Fax: (517) 543-9264 Email: Wes.Redfield@spartanchassis.com	Wesley D. Chestnut Senior Compliance Analyst Product Assurance (517) 543-6400, ext. 3275 Fax: (517) 543-7729 Email: wdchestn@spartanmotors.com

Preparer's Signature: _____

PART 573 Defect and Noncompliance Report

I. IDENTIFY THE VEHICLE MODELS INVOLVED IN THE RECALL

2. Identify the Vehicles Involved in the Recall:

Make:	Spartan Motors Chassis, Inc.		
Model:	Gladiator		
Model Years Involved:	2003 thru 2009		
Vehicle Type:	Incomplete Fire Apparatus Chassis Cab		
Weight Range:	From GVWR: 42K lbs	To GVWR:	83K lbs
Weight Class:	From Class: 8	To Class:	8
Beginning VDM:	2/27/2003	Ending VDM:	11/17/2009
% Potentially Involved:	100%		

Descriptive information which characterizes/distinguishes the recalled vehicles from those model vehicles not included in the recall:
 Incomplete fire apparatus chassis cabs affected by this recall are equipped with certain, center forward non-ABTS which are installed on an order by order basis.

II. IDENTIFY THE RECALL POPULATION

3. Furnish the total number of vehicles recalled potentially containing the defect or non-compliance

MODEL	MODEL YEAR	No. POTENTIALLY INVOLVED
Gladiator	2003	10
Gladiator	2004	5
Gladiator	2005	23
Gladiator	2006	14
Gladiator	2007	10
Gladiator	2008	32
Gladiator	2009	6
TOTAL:		100

4. Furnish the approximate percentage of the total number of vehicles estimated to actually contain the defect or noncompliance.

Approximate Defect Percentage: TBD

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:

Our recall population was determined by performing a search of units built with the part number of the component used in the design of attachment for seatbelt anchorage to the center of rear wall of cab. This component is only used when certain non-ABTS are selected for center, forward facing seating arrangement in the rear of cab.

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.

The component used for seatbelt anchorage to the mid-section of the cab rear wall separates from the attachment point when loads less than those required by FMVSS 210 are applied.

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

TBD

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

The anchoring component may separate from the cab during a vehicle crash and/or when significant loading occurs on the anchorage point. This may result in occupant injury.

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

The anchoring component may separate from the cab, as stated above, without warning.

If the defect or noncompliance is in a component or assembly purchased from a supplier, identify the supplier by corporate name and address:	
Generic Component Name:	N/A
Supplier Part Number:	N/A
Spartan Part Number:	N/A
Supplier Corporate Name:	N/A
Address:	N/A
CEO or Knowledgeable Rep:	N/A

IV. PROVIDE THE CHRONOLOGY IN DETERMINING THE

If the recall is for a defect, complete item 6, otherwise item 7

6. If defect, furnish a chronological summary with dates of all the principle events that were the basis for the determination of the defect. Include number of reports, accidents, injuries, fatalities, and warranty claims.

N/A

7. If noncompliance, identify and provide the test results or other data in chronological order with dates on which the noncompliance was determined.

02FEB10 - Spartan Motors Chassis, Inc. received test report from test agency who performed testing on all forward facing, rear mounted seats in accordance with FMVSS 210 on a future cab model design. After receipt of the report, the failure was identified and non-compliance determined.

04FEB10 - Spartan Motors Chassis, Inc. begins preparing Form 573 for submission to the NHTSA in accordance with 49CFR573 and 49CFR577.

05FEB10 - Spartan Motors Chassis, Inc. Product Assurance - Compliance notifies the NHTSA

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.

The remedy for the non-compliance is not yet known.

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

TBD

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.

TBD

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 this recall.

TBD

VII. FURNISH RECALL COMMUNICATIONS

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 concerning this recall from the time your company determines the defect or noncompliance condition on, not just the initial notification.

DOCUMENT DESCRIPTION	DATE AND MANNER SUBMITTED
Notification letter to other manufacturers	12-Feb-10
Draft Notification letter to purchasers	TBD
Press release (if applicable)	N/A
Recall Service Bulletin (RSB)	TBD
Notification Envelope	Pre - Approved

All documents to be faxed to 202-366-7882, then mailed.

The manufacturer's campaign identification number if not identical to the number assigned by NHTSA.

10005