



P. O. Box 1160  
St. Joseph, MO 64502-1160  
Phone: 800-255-0317  
Fax: 785-989-3075

# Product Safety Bulletin PS – 0192363

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**This Product Safety Bulletin must be read and understood by all Service Technicians who are trained and authorized to service the machines affected by this bulletin.**

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## **SAFETY RELATED MANDATORY MACHINE INSPECTION**

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**To:** All Snorkel product owners and previous owners, Snorkel dealers and previous dealers, national accounts, branch accounts, and end users.

**Attention:** Service Manager

**Machines Affected:** TB120, TB126J, and PRO126 manufactured before year 2004

**Subject:** Mandatory inspection on applicable machines

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**Read and fully understand this Product Safety Bulletin before inspecting the machine. Follow the instructions completely. Contact Snorkel Service Department with questions or concerns about this bulletin at 1-800-255-0317.**

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Please use this Product Safety Bulletin along with the enclosed Reimbursement Claim Card to help us determine some important information about your machine. A reimbursement credit of \$50 is available for providing us complete information.

### **AWarning**

**Failure to comply with this Product Safety Bulletin could increase the potential for an accident. Death or serious injury can result from such accidents. After evaluating the machine condition and sensor attachments, check the appropriate box on the Reimbursement Claim Card, remove the machine from service if required, and contact Snorkel to schedule a machine update.**

### **Step 1 – Machine Ownership/Location**

Do you have an affected machine in your possession?

Yes: Fill in Step 1 on the Reimbursement Claim Card and proceed with Step 2.

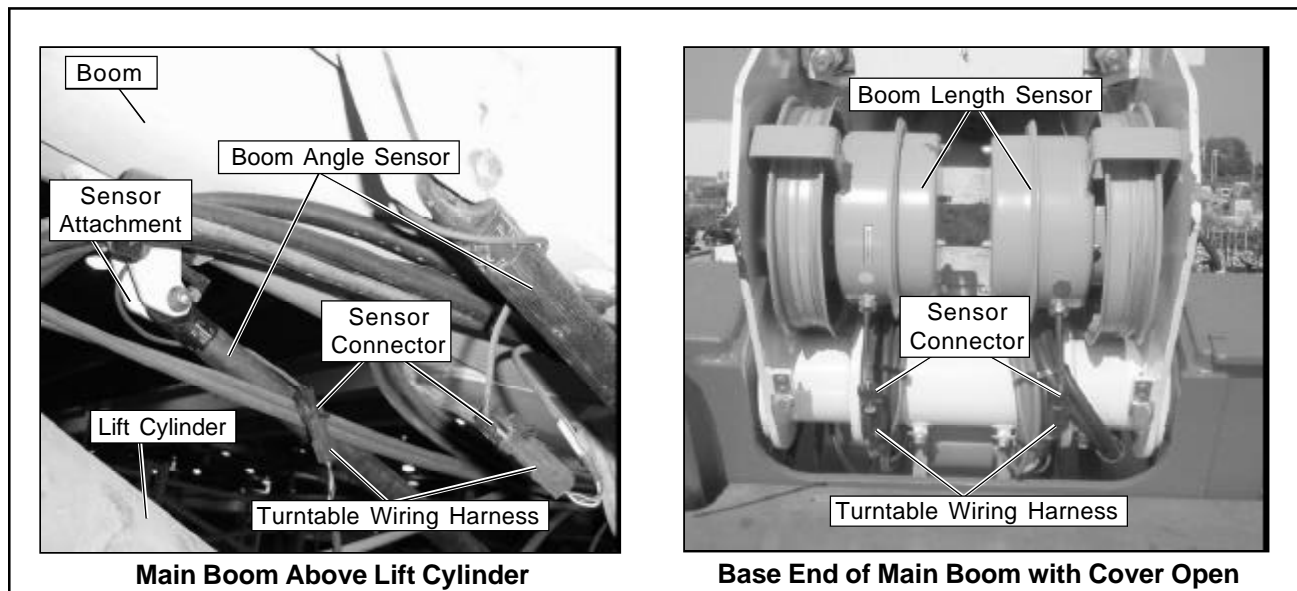
No: Fill in Step 1 on the Reimbursement Claim Card with the new owner information and return it to Snorkel or call Snorkel at 1-800-255-0317.

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## Step 2 – Number of Sensors Inspection

With the machine in the stowed position, check to see how many boom angle sensors and boom length sensors are on it. The angle and length sensors both must be functionally wired, as shown in Figure 1.



**Figure 1 – Angle and Length Sensor Inspection**

Does the affected machine in your possession have two angle sensors and two length sensors that are functionally wired?

Yes: Fill in Step 2 on the Reimbursement Claim Card. The inspection on your machine is complete. Return the card to receive reimbursement credit for completing this inspection.

No: Fill in Step 2 on the Reimbursement Claim Card and proceed with Step 3.

## Step 3 – Machine Operating Condition

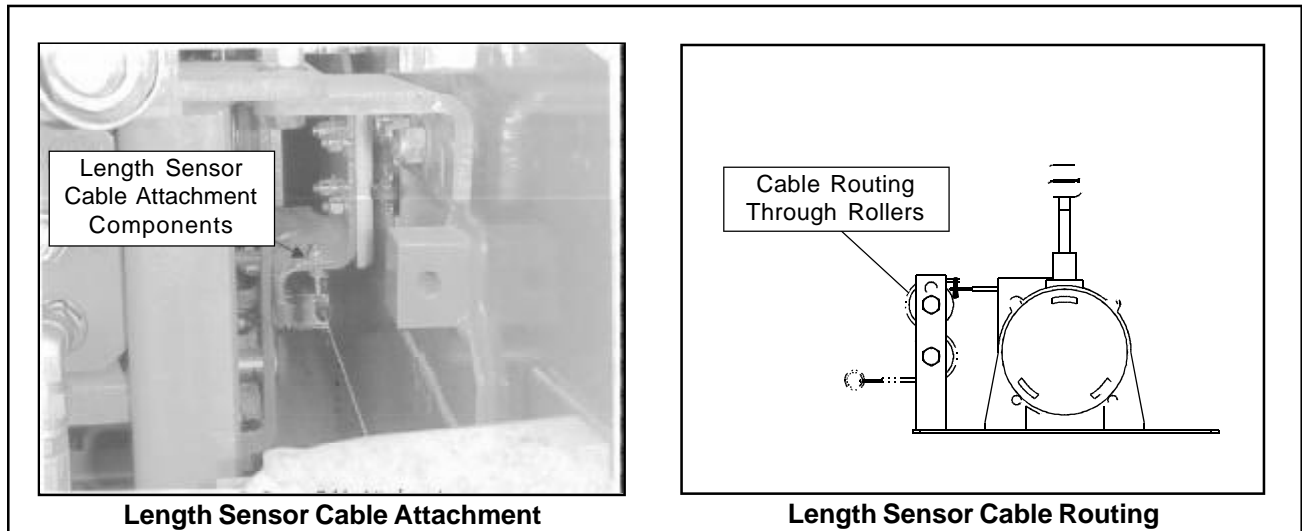
Is the affected machine with only one angle and/or one length sensor, currently in working order?

Yes: Fill in Step 3 on the Reimbursement Claim Card and proceed with Step 4.

No: Check the appropriate box in Step 3 on the Reimbursement Claim Card that indicates the machine is out of service. Return the card to receive reimbursement credit for completing this inspection and contact the Snorkel Service Department at 1-800-255-0317 to schedule a machine update.

## Step 4 – Sensor Attachment Inspection

Inspect the boom angle sensor (refer to Figure 1) attachment points and the length sensor cable attachment (refer to Figure 2). The sensor attachment components must be in good working order and properly installed with the length sensor cable threaded through the cable guide.



**Figure 2 – Base End of Main Boom with Cover Open**

Are the sensor attachment components properly installed and in good working order?

Yes: Check the box in Step 4 on the Reimbursement Claim Card that indicates the machine is in operating condition with one angle and/or one length sensor.

### **AWarning**

**The potential for an accident increases when operating an aerial platform that is damaged or malfunctioning. Death or serious injury can result from such accidents. Immediately stop machine operation if the boom lowers without retracting. Do not extend or lower the boom if the Envelope Management System errors out at any time during machine operation. Do not operate the aerial platform if it is damaged or malfunctioning.**

Perform a prestart inspection as instructed in the Operator's Manual at the beginning of each shift, before using the aerial platform on the job.

Return the card to receive reimbursement credit for completing this inspection and call the Snorkel Service Department at 1-800-255-0317 to schedule a machine update.

No: Immediately remove the machine from service. Check the box on the Reimbursement Claim Card that indicates the machine is out of service until the machine is updated. Return the card to receive reimbursement credit for completing this inspection and call the Snorkel Service Department at 1-800-255-0317 to schedule a machine update.

### **Reimbursement**

To receive a \$50 reimbursement credit for this inspection, return the completed, postage paid Reimbursement Claim Card to:

Snorkel International  
P. O. Box 1160  
St. Joseph, MO 64502-1160



# Snorkel

P.O. Box 1160, St. Joseph,  
MO 64502-1160

Tel: 785-989-3000  
Fax: 785-989-3070  
www.snorkelusa.com

**Subject: Reimbursement for mandatory inspection per PS – 0192363**

Fill out the left side of the PS – 0192363 Reimbursement Claim Form. Then check the appropriate boxes on the right side of the Reimbursement Claim Form while inspecting the machine with the enclosed Product Safety Bulletin, PS – 0192363.

In order to receive a reimbursement credit of \$50 to your account, the attached Reimbursement Claim Form must be completely filled out according to the enclosed Product Safety Bulletin, PS – 0192363, and returned.

To return the Reimbursement Claim Form fold this letter on the dotted lines, making sure the postage paid return address is on the outside, and tape where indicated.

After inspecting the machine, contact Snorkel to schedule a machine update and remove the machine from service if required.

If you have any questions or concerns please contact the Snorkel Service Department at 1-800-255-0317.

Thank you,

Snorkel International

<b>PS – 0192363 Reimbursement Claim Form</b>	
<b>Machine Model</b> <input type="checkbox"/> TB120 <input type="checkbox"/> TB126 <input type="checkbox"/> PRO126 <i>Please print the following clearly.</i>  _____ <i>Machine Serial Number</i>	<b>Step 2 - Number of Sensors Inspection</b> Number of angle sensors functionally wired <input type="checkbox"/> One <input type="checkbox"/> Two  Number of length sensors functionally wired <input type="checkbox"/> One <input type="checkbox"/> Two
<b>Step 1 - Machine Ownership/Location</b> <input type="checkbox"/> Original Owner <input type="checkbox"/> New Owner <input type="checkbox"/> Unknown <i>Must be filled out completely to receive reimbursement.</i>  _____ <i>Company Name</i>  _____ <i>Name</i>  _____ <i>Address</i>  _____ <i>City/State/Zip</i>  _____ <i>Phone Number</i>	<b>Step 3 - Machine Operating Condition</b> <input type="checkbox"/> Working Order <input type="checkbox"/> Temporarily Out of Service <input type="checkbox"/> Permanently Out of Service  <b>Step 4 - Sensor Attachment Inspection</b> <input type="checkbox"/> Working machine with one angle or length sensor I will contact Snorkel to schedule a machine update.  <input type="checkbox"/> Out of service until machine is updated I will contact Snorkel to schedule a machine update.  <i>By signing below, I verify that the machine is in compliance with Product Safety Bulletin, PS – 0192363.</i>  _____ <i>Name</i>  _____ <i>Signature/Date</i>

1. *Fold here*

3. *Apply tape here*

2. *Fold here*



NO POSTAGE  
NECESSARY  
IF MAILED  
IN THE  
UNITED STATES

**BUSINESS REPLY MAIL**

FIRST-CLASS MAIL PERMIT NO 1375 ST. JOSEPH MO

POSTAGE WILL BE PAID BY ADDRESSEE

ATTN: SERVICE DEPARTMENT  
SNORKEL  
P.O. BOX 1160  
ST. JOSEPH, MO 64502-9701

