

## Safety Notice

**130005**  
**GENIE AUSTRALIA**

**Date:** July 29, 2013  
**Model Affected:** Z-135/70  
**Subject:** Secondary Boom Angle Sensor Calibration  
**Allowable Hours:** 60 minutes

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### Issue:

Genie has become aware of secondary boom angle sensor calibrations performed in the field in which the machine's service manual may not have been followed creating an improperly calibrated machine. **An improperly calibrated machine can lead to machine instability resulting in a machine tip over.**

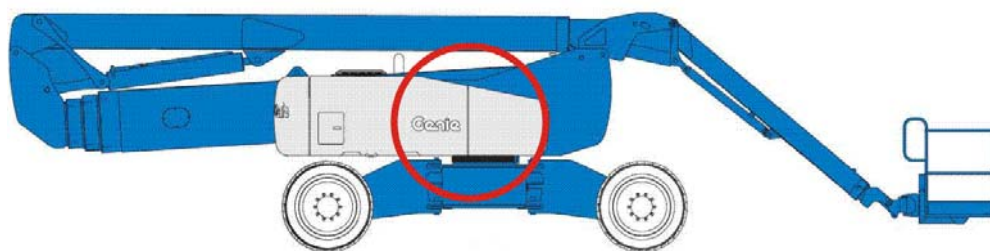
### Action Required:

**This safety notice requires the immediate removal of all Genie Z-135/70 Boom lifts from service. Machines may only be returned to service after the inspection listed below is performed.**

Tool required: Properly calibrated digital level with magnetic base.

### Inspection Procedure:

1. Locate and remove all of the machine models listed above from service.
2. Perform this procedure with the machine on a firm level surface, with the axles extended and the boom in the stowed position.
3. Locate the swing chassis.



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4. Place the digital level on the swing chassis as shown below.



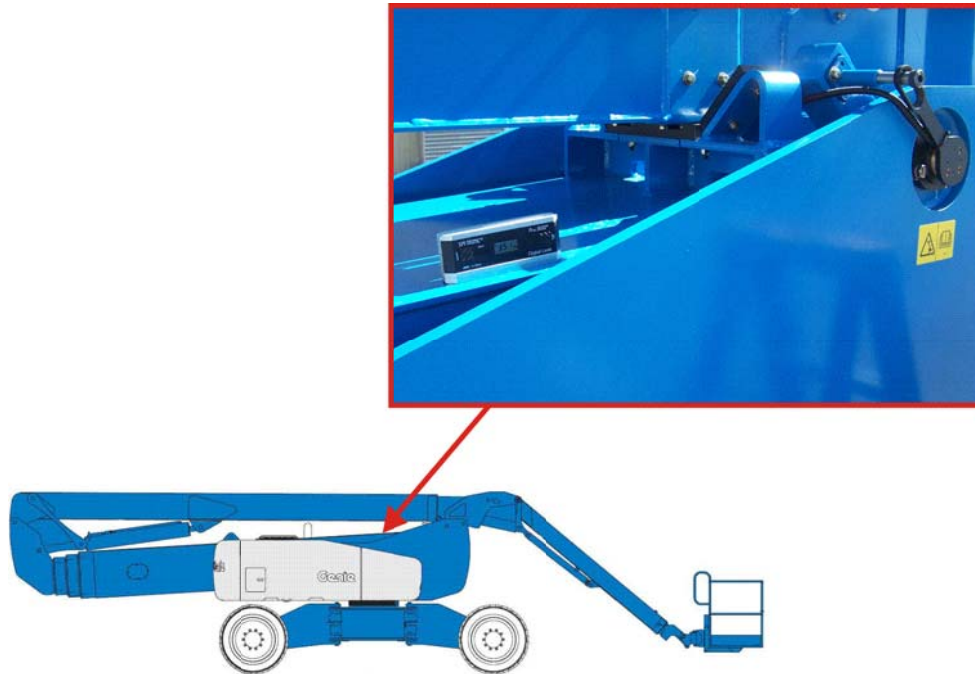
5. Set the digital level read out to zero.




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6. Working on the same side of the machine, move the digital level from the swing chassis to the top of the secondary boom closest to the pivot end as shown below. Do not change the orientation of the digital level.



7. At the ground controls:
- Start the engine.
  - Fully raise the secondary boom  until any one of the inner boom sections just starts to extend.
  - Stop extending and turn the engine off.

Note: If the digital level times out before the secondary boom is fully raised, repeat the procedure from step 4.

8. Record the value displayed on the digital level in the attached “Completion Form”.
- ⊙ If the value is greater than or equal to ( $\geq$ )  $75.5^\circ$ , the machine is safe to use and can be returned to service. Finish filling out the “Completion Form” and return to Genie. No further action is required.
  - ⊗ If the value is less than ( $<$ )  $75.5^\circ$ , the machine must remain out of service. The secondary boom angle sensor will need to be calibrated. Continue on to step 9.



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9. Calibrate the secondary angle sensor of the machine per the instructions in the machine's service manual (section 4-9). Record the desired digital level reading, greater than or equal to ( $\geq$ ) 75.5 °, after calibration in the attached Completion Form.

**Note: Do not perform this procedure unless you are trained and qualified to do so.**

10. Return the machine to service.
11. Finish filling out the "Completion Form" and return to Genie. This will serve as verification that you have completed Safety Notice 130005.

### Warranty:

Genie requires that the seller of a Genie machine report to Genie the model and serial number of each machine sold, as well as the name, address, and telephone number of the new owner, within 60 days of the sale.

It is your responsibility to communicate this important information to all machine owners and applicable branches. If you require additional copies of this bulletin or have any questions, please contact the Genie Australia Service Department at:

**Phone: +617 3456 4444**

We share in your intense concern for the safety of our customers and sincerely appreciate your efforts on our behalf. Please do not hesitate to contact us if you have any questions regarding this important safety issue.

### Enclosures:

Machine Location Record Form  
Machine Status Form  
Distributor Transfer of Ownership Form



# Machine Location Record

## SAFETY NOTICE 130005

**Description:** Secondary Boom Angle Sensor Calibration  
**Models and Serial Number Affected:** see Safety Notice

1. Please complete this machine location record for the machines affected within the above models and serial range.
2. If one or more of the following machines are no longer owned by your company, please complete the attached machine status form in addition to the machine location record.
3. Return the machine location form and/or the machine status form via fax to your local Genie service center:

|                 |                |                    |                |
|-----------------|----------------|--------------------|----------------|
| Queensland      | (07) 3456 4455 | South Australia    | (07) 3456 4455 |
| New South Wales | (02) 9832 0952 | Western Australia  | (08) 9334 5600 |
| Victoria        | (03) 9768 2544 | Northern Territory | (07) 3456 4455 |
| Tasmania        | (03) 9768 2544 | New Zealand        | (09) 443 2435  |

4. A Genie representative will contact the designated person from your company to co-ordinate the completion of the bulletin.

**NOTE:** It is the recipient's responsibility to circulate all bulletin information throughout the entire company where there are one or more locations.

**COMPANY:** \_\_\_\_\_

**ADDRESS:** \_\_\_\_\_

**CONTACT:** \_\_\_\_\_

**PHONE NO.:** \_\_\_\_\_

| Model | Serial No. | Fleet No. | Location and Depot |
|-------|------------|-----------|--------------------|
| _____ | _____      | _____     | _____              |
| _____ | _____      | _____     | _____              |
| _____ | _____      | _____     | _____              |
| _____ | _____      | _____     | _____              |
| _____ | _____      | _____     | _____              |
| _____ | _____      | _____     | _____              |
| _____ | _____      | _____     | _____              |
| _____ | _____      | _____     | _____              |
| _____ | _____      | _____     | _____              |

FOR FURTHER ASSISTANCE, CONTACT GENIE AUSTRALIA'S SERVICE DEPARTMENT  
@ 1-800-331-660



## Machine Status Form

### SAFETY NOTICE 130005

**Description:** Secondary Boom Angle Sensor Calibration  
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**NOTE:** It is the recipient's responsibility to circulate all bulletin information throughout the entire company where there are one or more locations.

**COMPANY:** \_\_\_\_\_

**ADDRESS:** \_\_\_\_\_

\_\_\_\_\_

**CONTACT:** \_\_\_\_\_

**PHONE NO.:** \_\_\_\_\_

**The machines listed below cannot be inspected for the following reasons.  
 (Please tick the one that applies)**

**Serial No**

|       |                                   |                                 |                               |
|-------|-----------------------------------|---------------------------------|-------------------------------|
| _____ | Scrapped <input type="checkbox"/> | Stolen <input type="checkbox"/> | Sold <input type="checkbox"/> |
| _____ | Scrapped <input type="checkbox"/> | Stolen <input type="checkbox"/> | Sold <input type="checkbox"/> |
| _____ | Scrapped <input type="checkbox"/> | Stolen <input type="checkbox"/> | Sold <input type="checkbox"/> |
| _____ | Scrapped <input type="checkbox"/> | Stolen <input type="checkbox"/> | Sold <input type="checkbox"/> |
| _____ | Scrapped <input type="checkbox"/> | Stolen <input type="checkbox"/> | Sold <input type="checkbox"/> |
| _____ | Scrapped <input type="checkbox"/> | Stolen <input type="checkbox"/> | Sold <input type="checkbox"/> |
| _____ | Scrapped <input type="checkbox"/> | Stolen <input type="checkbox"/> | Sold <input type="checkbox"/> |
| _____ | Scrapped <input type="checkbox"/> | Stolen <input type="checkbox"/> | Sold <input type="checkbox"/> |

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 @ 1-800-331-660**

## Distributor Transfer of Ownership Form

**Model Number:** \_\_\_\_\_

**Serial Number:** \_\_\_\_\_

**Distributor:** \_\_\_\_\_

\_\_\_\_\_

**New Owner:** \_\_\_\_\_

\_\_\_\_\_

**Date of Commissioning:** \_\_\_\_\_

**Address of New Owner:** \_\_\_\_\_

\_\_\_\_\_

**Person of Contact:** \_\_\_\_\_

**Phone Number:** \_\_\_\_\_

**Fax Number:** \_\_\_\_\_

**Special Comments:** \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_