

ORG 7727

Manufacturer and Product Identification

Manufacturer's Information

Submission Type: Initial Revision

Full Name of Company: Allen Fabricators Incorporated

All Company DBAs: _____

Company Principal Officer: Owens Gregg Secretary
Last First Position

Company Address: 10106 Smith Road
Street, Suite No., P.O. Box No.

Fort Wayne Indiana US 46809
City State/Province Country Postal Code

Company Contact Info.: 260-458-0008 260-399-2446 gowens@allenfab.com
Telephone Facsimile E-mail

allenfab.com
Web Site

Submitted by Company Official: Gregg Owens Secretary Apr 20, 2012
Printed Name Company Position Date

Gregg Owens
Signature

Your Company Manufactures What Regulated Equipment Items? (Check all that apply)

(Regulated equipment items are only the 13 equipment listed below that are subject to a Federal motor vehicle safety standard.)

- Tires Rims Brake hoses Brake fluid Seat Belts Lamps, Reflectors, and Assoc. Equip. CNG Containers
 Motorcycle Helmets Child Restraints Systems Platform Lifts Rear Impact Guards Triangular Warning Devices

Your Company Manufactures What Types of Vehicles? (Check all that apply)

(Please identify the approximate GVWR (in pounds) in the space provided below.)

<input type="checkbox"/> Passenger Cars GVWR _____ to _____	<input type="checkbox"/> Multipurpose Passenger Vehicles GVWR _____ to _____	<input type="checkbox"/> Trucks GVWR _____ to _____	<input type="checkbox"/> Low-Speed Vehicles GVWR _____ to _____
<input type="checkbox"/> Pole Trailers GVWR _____ to _____	<input type="checkbox"/> Buses (other than School Buses) GVWR _____ to _____	<input type="checkbox"/> School Buses GVWR _____ to _____	<input type="checkbox"/> Motorcycles GVWR _____ to _____
<input checked="" type="checkbox"/> Trailers GVWR <u>1000</u> to <u>20000</u>			

Incomplete vehicles - means an assemblage consisting, at a minimum, of chassis (including the frame) structure, power train, steering system, suspension system, and braking system, in the state that those systems are to be part of the completed vehicle, but requires further manufacturing operations to become a completed vehicle. Also means an incomplete trailer. GVWR _____ to _____

What Type of Vehicle Manufacturer or Alterer is Your Company? (check all that apply)

Note: If you are a completed vehicle or incomplete vehicle manufacturer, you must also submit VIN deciphering info under 49 CFR Part 565

- Completed Vehicle Manufacturer** - a manufacturer of vehicles that require no further manufacturing operations to perform their intended function
- Incomplete Vehicle Manufacturer** - a manufacturer of incomplete vehicles, as defined above
- Intermediate Manufacturer** - a manufacturer (other than the incomplete vehicle manufacturer or the final-stage manufacturer) who performs manufacturing operations on a vehicle manufactured in two or more stages
- Final-Stage Manufacturer** - a manufacturer who performs such manufacturing operations on an incomplete vehicle that it becomes a completed vehicle
- Alterer** - a person who alters by addition, substitution, or removal of components (other than readily attachable components), a certified vehicle before the first purchase of the vehicle other than for resale

Instructions for Completing, Revising, and Submitting Your Information

49 CFR Part 566 requires that a manufacturer of motor vehicles and regulated motor vehicle equipment items submit to NHTSA not later than 30 days after manufacturing begins, information about the company and the products it manufactures. This suggested form will assist a manufacturer to comply with Part 566. Please complete the form by typing or clearly printing. Each manufacturer who has submitted this information must keep its entry current, accurate, and complete by submitting revised information not later than 30 days after the relevant changes in its business occur.

Mail the completed form to:
Attention: VIN Coordinator
National Highway Traffic Safety Administration
1200 New Jersey Avenue, SE
West Building, Room 1045-207
Washington, DC 20590
Fax: 202-366-3881