EVINRUDE E-TEC | BRP

OUTBOARDS

Administrative
Bulletin

A

Suggested Routing:
☐ Service ☐ Sales ☐ Parts

Date: December 3, 2009 **No.** 2009-02(A)

MODELS: All *Evinrude*® *E-TEC*®

SUBJECT: *EMM* Replacement

This bulletin replaces Administrative Bulletin 2008-01(A)

Dear *Evinrude/Johnson*® Dealers:

This communication is to inform *Evinrude*/*Johnson* dealers of the policies and procedures for the Warranty Replacement of *Evinrude E-TEC EMM*s.

NOTE: For outboards not in warranty, refer to Parts and Accessories Bulletin 2008-02(P).

Procedure for *EMM* Replacement

1) North American dealers MUST call Dealer Support Services (1-800-888-4662) for authorization before returning an *EMM* for warranty replacement. Dealers outside of North America must contact your regional office for authorization before returning an *EMM* for warranty replacement.

2) After receiving authorization, complete a warranty allowance request form, P/N 773629, and return it with the *EMM*. See "Sample Warranty Allowance Request" on page 2 for required information.

IMPORTANT: *EMM*s sent in without a claim, or *EMM*s or claims submitted without prior authorization will be returned. A $35.00 administrative fee will be charged to the dealer's account. A new claim must be submitted.

3) If unable to communicate with *EMM*, include the serial number of each fuel injector with its corresponding cylinder number. If upload problems were experienced (for example during injector replacement) send any disk(s) with *EMM*.

4) Package the *EMM* well. Damage caused from inadequate packaging is not covered by warranty. Send only the *EMM*, warranty allowance request, and disk(s) if applicable.

IMPORTANT: Send *EMM* only. Do not send *EMM* mounting screws or grommets. Parts other than the *EMM* and disk(s) will **NOT** be returned or replaced under warranty.

Shipping Labels – Canada Dealers Only

For Canadian Dealers – Please order and use return label, P/N 355262, for all *EMM* and propeller warranty returns.

Shipping Information

U.S. Dealers ship to:
BRP US Inc.
300 Sea Horse Drive, Dock 5
Waukegan, IL 60085

Attn: *EMM* Programming

Canadian Dealers ship to:
Centre de pieces de garantie BRP
BRP Warranty Parts Center
565, de la Montagne
Valcourt, QC J0E 2L0

Attn: *EMM* Programming

North American Dealers - *EMM*s will be returned UPS† ground prepaid. UPS NEXT DAY† requests will be charged to the dealer's UPS account number. UPS account number must be printed on claim. UPS NEXT DAY C.O.D. is not available.

In-stock *EMM*s normally have a turnaround time of 24 hours from receipt (not including shipping). BRP is not responsible for shipping delays once a package leaves its facility.

Dealers Outside of North America - Contact regional office.

Sample Warranty Allowance Request

Claims that are missing **REQUIRED** information will not be processed and will be returned with the *EMM*.

EVINRUDE® | Johnson®

BRP US Inc.
DEALER SUPPORT SERVICES
PO Box 597
Sturtevant, WI 53177

WARRANTY ALLOWANCE REQUEST

CLAIM NO.

OWNER'S NAME ADDRESS AND ZIP CODE (REQUIRED)	SERVICING DEALER'S NAME-ADDRESS AND ZIP CODE (REQUIRED)	DATE OF REQUEST
Required	*Required* *Please include name of Service Technician*	*Required*
		DATE OF INCIDENT: *Required*
		DATE WORK COMPLETED: *Required*
		HOURS USED: *Required*

ENGINE MODEL AND SERIAL NO.	PURCHASE DATE	SERVICING DEALER'S CODE NO.
Required	*Required*	*Required*

"X" IF CLAIM IS A PARTS & ACCESSORIES CLAIM	"X" IF THIS IS A REPEATED PART FAILURE CLAIM	AUTHORIZATION NUMBER

NOTE: GRAY SHADED AREAS FOR FACTORY USE ONLY DEALER FILL IN ALL OTHER.

CUSTOMER COMMENT CODE(S) (REQUIRED)									

ADDITIONAL COMMENTS (REQUIRED)

Dealer UPS account number (if requesting Next Day return shipment).

Name of Dealer Support Representative and Authorization Number provided.

Detailed description of engine symptoms.

SHIPPING INSTRUCTIONS

INVOICE NUMBER

RETURN ALL PARTS ☐

RETURN *PARTS ONLY ☐

ATTN

CHECK AMOUNT $

ONLY EVINRUDE/JOHNSON GENUINE PARTS MAY BE USED IN WARRANTY REPAIR

PART THAT CAUSED FAILURE

PART NUMBER	PART NAME	GROUP CODE	ACCT DEPT TIME ORDER NO.	FLAT RATE CODE	FLAT RATE TIME HRS. THS.	FLAT RATE CODE	FLAT RATE TIME HRS. THS.
Leave Blank	*Leave Blank*					*E127*	

WARRANTY REIMBURSEMENT MADE ONLY FOR PARTS LISTED BELOW.

LIST ALL PARTS USED IN REPAIR

PART NUMBER	PART NAME	QTY	PART NUMBER	PART NAME	QTY
Leave Blank	*EMM*	*1*			

EPA REQUIRED Circle "Y" for yes or "N" for no.

Y N Did warning horn sound?
Y N Did engine go into S.L.O.W.™ Mode?
Y N Did engine stop running?
Y N Did engine exhibit reduced drivability/misfire?

OWNER'S SIGNATURE (REQUIRED)	DEALER'S SIGNATURE	APPROVED DATE
	Required	

☐ **Claim Return - See Back of Claim**

RETAIN GREEN COPY SEND BALANCE OF SET TO FACTORY
USE TYPEWRITER OR PRESS HARD WITH BALL POINT PEN.

HOLD ALL PARTS FOR 90 DAYS PENDING FACTORY RECALL

P/N 773629 Rev. 6/04
DSS162