NISSAN
FORKLIFT

SERVICE MANUAL

MODEL

2W2

PUBLICATION

SM2W2-MAINT

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2W2

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FIGURE 5.
Remove the bushings and springs from both sides of the handle, utilizing a flat blade screwdriver.



FIGURE 5

FIGURE 6.
Note the orientation of the rear leg of spring for proper installation. *(Rear Leg)*

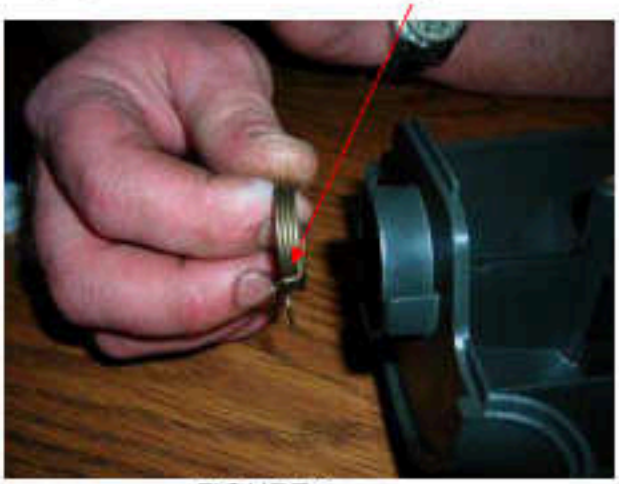


FIGURE 6

FIGURE 7.
Hook rear leg of spring over tab as shown here.



FIGURE 7

FIGURE 8.
Cross front leg of spring over and hook on tab as shown here. Repeat for other side.

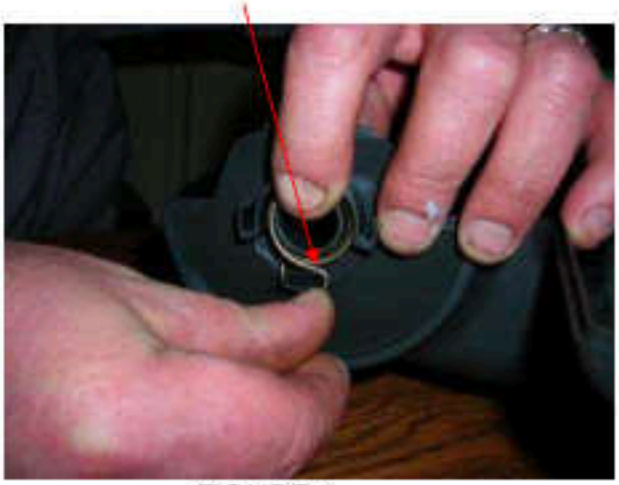


FIGURE 8

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NISSAN FORKLIFT

Drive Motor Diagnostic/Replacement Report

BARRETT Industrial Trucks

REPORT DATE:_____

1. Contact Information:

Customer Name/Location _____

Dealer Name/Location _____ Repairs by: End-User ☐ Dealer ☐

2. Equipment Information:

Model _____ Serial # _____ Hours _____

Customer Unit # _____ Purchase Date _____ Date Last PM _____ Hours Last PM _____

3. Application Information:

Floor conditions Clean ☐ Smooth ☐ Rough ☐ Dry/Dusty ☐ Wet ☐

# of Shifts _____ Running hours per shift _____ Operating days per week 1-2 ☐ 3-4 ☐ 5-6 ☐ 6-7 ☐

4. Previous Failure History:

Drive Motor Replaced Previously? Yes ☐ No ☐

If Yes, complete the following:

Fail Date _____ Hours _____ Serial Number of failed Drive Motor _____ Repair Date _____

Fully describe **both the nature and cause of the Drive Motor Problem** requiring it to be replaced:

_____

_____

_____

Was the replacement of the Drive Motor claimed while under warranty? Yes ☐ No ☐

If the answer to the above question was 'Yes' what was the Claim # _____

5. Current Failure Information:

Fail Date _____ Hrs _____ Motor Serial# _____

Repair Date _____ Condition of Battery, Voltage Readings: Static _____ Loaded _____

Fully describe **both the nature and cause of the Drive Motor Problem** requiring it to be replaced:

_____

_____

Provide the following information:

(1) Error/Trouble Codes displayed at time motor failed: _____

(2) Record of Inspection. Condition of following depending on type of Drive Motor, AC or DC.

Item	Good	Worn	Other	*If condition is "Other" please describe:*
1. Brushes	☐	☐	☐	_____
2. Brush Holder	☐	☐	☐	_____
3. Commutator	☐	☐	☐	_____
4. Armature	☐	☐	☐	_____

NFC Warranty Claim # _____ Claim Status: Pending ☐ Denied ☐ Appealed ☐ Rejected ☐

Serial # of new replacement Motor _____ Replaced by, (Name) _____

Complete Report in its entirety. Failure to provide all information will result in delays and/or denied claim.

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