

DEPARTMENT OF HOMELAND SECURITY
U.S. COST GUARD

OMB No: 1625-0010
Exp. Date: 08/31/2026

CAMPAIGN UPDATE REPORT

Privacy Act Statement

AUTHORITY: 14 U.S.C. §505; 46 U.S.C. §4310; and 33 CFR 179.13(a)(2)

PURPOSE: This form is authorized by 46 U.S.C. Chapter 43 and 33 CFR 179 for the collection of information concerning the products involved in a Defect Notification and Recall Campaign and used to evaluate the diligence with which the campaign is conducted.

ROUTINE USES: The information provided on this form will become a part of the official U.S. Coast Guard record covering this campaign to be used in evaluating the diligence with which your company conducts this campaign. For more information on how USCG uses this information, please see DHS/USCG PIA-008 Marine Information for Safety and Law Enforcement (MISLE), available at <https://www.dhs.gov/privacy>.

DISCLOSURE: Furnishing this information is mandatory. Failure to provide the information requested within 60 days after the manufacturer submits the Defect Noncompliance Report. Additional CG-4918 forms must be submitted within 90-day intervals thereafter, until the recall campaign reaches and acceptable level of completion. Failure to submit this report within specified time may result in a civil penalty of up to \$1100.00.

I acknowledge that I have read and understand the above disclaimer: _____

Mail to: U.S. Department of Homeland Security, Commandant (CG-BSX-23), U.S. Coast Guard Stop 7501
2703 Martin Luther King Jr Ave SE, Washington, DC 20593-7501

1. NAME AND ADDRESS OF COMPANY CONDUCTING DEFECT NOTIFICATION CAMPAIGN (include ZIPCODE)	CAMPAIGN NUMBER
	REPORT NUMBER

2. NUMBER OF UNITS WHICH MIGHT CONTAIN THE PROBLEM
(Provide justification in block #9 if number differs from item 10.a. of Defect/Noncompliance Report) _____

3. NUMBER OF FIRST PURCHASERS NOTIFIED ABOUT THE PROBLEM _____

3a. NUMBER OF RETURNED NOTIFICATIONS _____

3b. LIST ALL HIN's FOR NOTIFICATIONS THAT WERE UNDELIVERABLE (attach as supporting document) _____

4. NUMBER OF DEALERS/DISTRIBUTORS NOTIFIED _____

5. NUMBER OF UNITS CORRECTED OR REPAIRED _____

5a. LIST ALL HIN's FOR UNITS CORRECTED (attach as supporting document) _____

6. NUMBER OF UNITS INSPECTED WHICH DID NOT HAVE THE PROBLEM _____

6a. LIST ALL HIN's FOR UNITS INSPECTED WHICH DID NOT HAVE THE PROBLEM (attach as supporting document) _____

7. NUMBER OF OWNERS WHO REFUSED THE OFFER TO REPAIR OR CORRECT _____

7a. LIST ALL HIN's OF OWNERS WHO REFUSED TO OFFER TO REPAIR OR CORRECT (attach as supporting document) _____

8. SHOULD THE USCG CEASE ITS RECEIPT OF ADDITIONAL FOLLOW UP REPORTS (CUR's)? (If yes, please state reasons) NO
 YES

THIS FORM IS AUTHORIZED BY 46 U.S.C. CHAPTER 43 AND 33 CFR 179 FOR THE COLLECTION OF INFORMATION CONCERNING THE PRODUCTS INVOLVED IN THIS DEFECT NOTIFICATION AND RECALL CAMPAIGN. THE INFORMATION PROVIDED ON THIS FORM WILL BECOME A PART OF THE OFFICIAL U.S.COAST GUARD FILE COVERING THIS CAMPAIGN AND WILL BE USED IN EVALUATING THE DILIGENCE WITH WHICH YOUR COMPANY CONDUCTS THIS CAMPAIGN. FAILURE TO SUBMIT THIS REPORT FORM WITHIN SPECIFIED TIME CONSTRAINTS CAN RESULT IN A CIVIL PENALTY OF \$1100.

SIGNATURE OF PREPARER	TITLE	DATE
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SPACE FOR ADDITIONAL INFORMATION

An agency may not conduct or sponsor, and a person is not required to respond to a collection of information unless it displays a valid OMB control number. The Coast Guard estimates that the average burden for this report form is 30 minutes. You may submit any comments concerning the accuracy of this burden estimate or any suggestions for reducing the burden to: U.S. Department of Homeland Security, Commandant (CG-BSX-23), U.S. Coast Guard Stop 7501 2703 Martin Luther King Jr Ave SE, Washington, DC 20593-7501 or Office of Management and Budget, Paperwork Reduction Project (1625-0010) Washington, DC 20503.