



HIACE

KLH

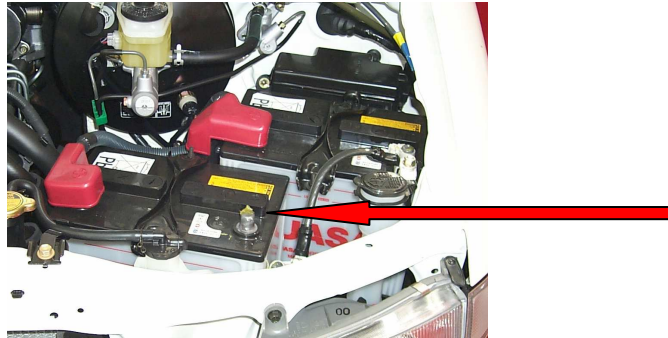
**PARTNUMBER : AM 18139000
PZ439-H0740-00**

**Performance Kit D-4D 75 kW
HIACE**

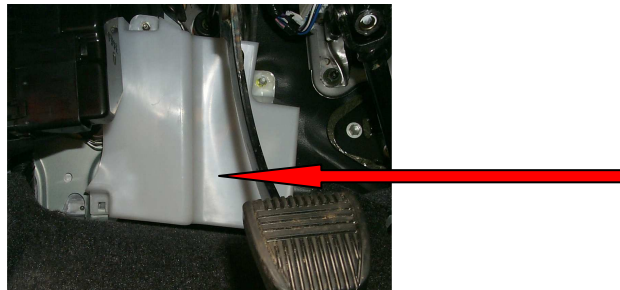
Weight :	1	kg
Installation time :	20	minutes
Gewicht :	1	kg
Anbauzeit :	20	minuten
Poids :	1	kg
Temps d'installation :	20	minutes
Gewicht :	1	kg
Installatie tijd :	20	minuten

INSTALLATION MANUAL-EINBAU ANLEITUNG-MONTAGE HANDLEIDING-MANUEL D'INSTALLATION

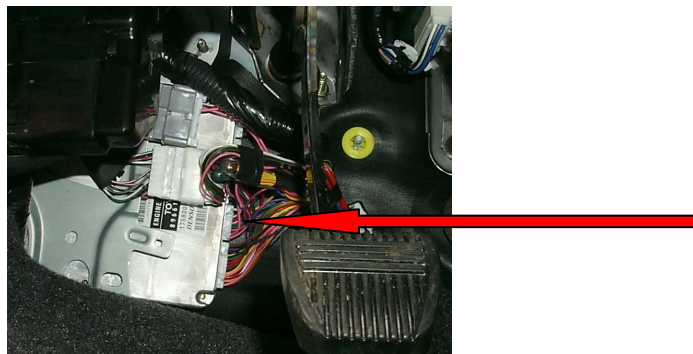
**Einbauanleitung
Installation Instruction
D-4D AM 18139 HiAce
PZ439-H0740-00**



1. **Minus-Pol der Batterien abklemmen**
Disconnect the negative pole of the batteries.

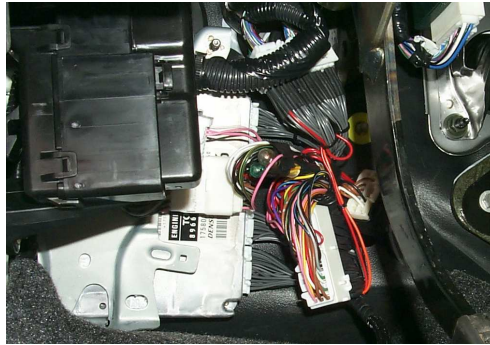


2. **Verkleidung der Motor ECU im Fahrerfußraum ausbauen.**
Remove fairing of the engine ECU in the driver's legroom.



3. **Stecker E15–E18 des Motorkabelstrangs aus der Motor ECU entfernen.**
Disconnect connector E15– E18 from the engine ECU.

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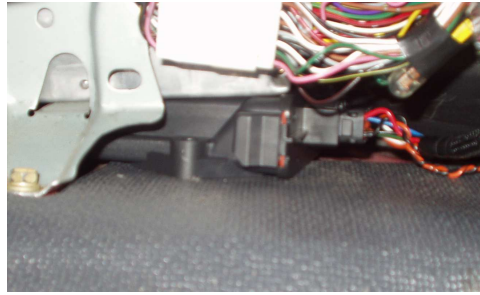


4. **Verbinden Sie den Kabelstrang (2) der ECU-Erweiterung mit dem fahrzeugseitigen Kabelstrang und der Motor-ECU.**
Connect the wiring loom (2) of the ECU-extension with the wiring loom of the car and the engine-ECU.



5. **Kleben Sie eine Seite des Klettbandes (4) auf die ECU Erweiterung (1) und die andere Seite auf das Bodenblech unterhalb der Motor ECU.**
Put one side of the Velcro strap (4) onto the ECU Extension (1) and the other side onto the floor panel below the engine ECU.

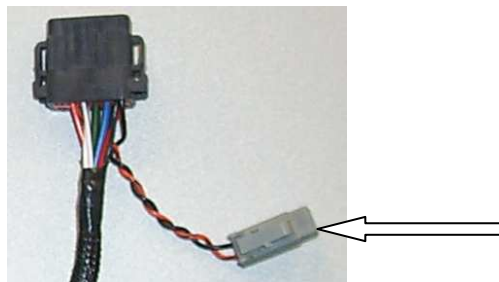
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6. **Platzieren** Sie die **ECU Erweiterung (1)** mit Hilfe von dem Klettband (4) unterhalb der Motor-ECU auf das Bodenblech.
Place the **ECU Extension (1)** below the engine-ECU onto the floor panel. Use Velcro straps (4).

7. **Bauen** Sie die Verkleidung ein.
Mount the **cover**.

8. **Schließen** Sie die **Batterien** wieder an.
Connect the **batteries**.



Achtung / Attention
Dieser **Stecker** wird **nicht benötigt** und bleibt frei.
This **connector** is **not used**.



TMG D-4D Performance Kit Repair Order Form

<input type="checkbox"/> EXCHANGE	ISSUE DATE : DD MM YY	Issue No. :
<input type="checkbox"/> REPAIR		
WARRANTY		
<input type="checkbox"/> IN	SIGNATURE : _____	
<input type="checkbox"/> OUT	Name (Spell out) _____ (+ Tel. No)	

DEALER INFORMATION

DLR CODE/DLR NAME	REPAIR ORDER NO.	PZ NO.	SERIAL NO.
			AM-NO:
VEHICLE MODEL	VIN/FRAME NO.		MILEAGE/KM
PURCHASE DATE DD MM YY	CUSTOMER CLAIM D DD MM YY	DATE REMOVED DD MM YY	

CUSTOMER COMPLAINT ANALYSIS

A. TROUBLE IN : WHOLE UNIT **S** BOX LOOM
 OTHER (_____)

B. TROUBLE OCCURS : ALWAYS SOMETIMES → (_____ TIMES/DAY, _____ TIMES/MONTH)
 TEMPERATURE (_____ °C, _____ ° F) DRY HUMID RAIN ALL WEATHER
 ENGINE RUNNING ENGINE OFF MOVING → (VEHICLE SPEED _____ KM/H, MPH)

SYMPTOM

<p>CHECK ENGINE</p> <p>01 <input type="checkbox"/> AFTER ENGINE STARTS 02 <input type="checkbox"/> IDLE 03 <input type="checkbox"/> CONSTANT RIDE 04 <input type="checkbox"/> ACCELERATION 05 <input type="checkbox"/> FULL LOAD 06 <input type="checkbox"/> VSC LIGHT 07 <input type="checkbox"/> TRC LIGHT</p>	<p>STARTING PERFORMANCE</p> <p>08 <input type="checkbox"/> NOT AT ALL 09 <input type="checkbox"/> BAD</p> <p>FLUIDITY</p> <p>14 <input type="checkbox"/> OIL 15 <input type="checkbox"/> WATER 16 <input type="checkbox"/> FUEL</p>	<p>ENGINE POWER</p> <p>10 <input type="checkbox"/> LESS THAN STANDARD 11 <input type="checkbox"/> SAME AS STANDARD 12 <input type="checkbox"/> BAD TOP SPEED 13 <input type="checkbox"/> BAD ACCELERATION</p>
<p>EMISSION</p> <p>17 <input type="checkbox"/> BLACK SMOKE 18 <input type="checkbox"/> WHITE SMOKE 19 <input type="checkbox"/> BLUE SMOKE a <input type="checkbox"/> IDLE b <input type="checkbox"/> ACCELERATION c <input type="checkbox"/> FULL LOAD</p>	<p>NOISE GENERATION</p> <p>20 <input type="checkbox"/> PERMANENT KNOCKING 21 <input type="checkbox"/> RATTLING ENGINE COMPARTMENT 22 <input type="checkbox"/> RATTLING GLOVE COMPARTMENT 23 <input type="checkbox"/> WHISTLING ENGINE COMPARTMENT</p>	<p>DRIVEABILITY</p> <p>24 <input type="checkbox"/> JERKING (IDLE) 25 <input type="checkbox"/> JERKING (CONSTANT RIDE) 26 <input type="checkbox"/> JERKING (FULL THROTTLE) 27 <input type="checkbox"/> JERKING (ACCELERATION) 28 <input type="checkbox"/> NO THROTTLE RESPONSE</p>
<p>MISSING PARTS</p> <p>29 <input type="checkbox"/> PERFORMANCE BOX 30 <input type="checkbox"/> WIRING LOOM 31 <input type="checkbox"/> TIE WRAP 32 <input type="checkbox"/> STICKER 33 <input type="checkbox"/> VELCRO STRAP 34 <input type="checkbox"/> HOMOLOGATION CERTIFICATE 35 <input type="checkbox"/> INSTALLATION MANUAL</p>	<p>WRONG PARTS</p> <p>36 <input type="checkbox"/> PERFORMANCE BOX 37 <input type="checkbox"/> WIRING LOOM 38 <input type="checkbox"/> HOMOLOGATION CERTIFICATE 39 <input type="checkbox"/> INSTALLATION MANUAL</p>	<p>MALFUNCTION PARTS</p> <p>40 <input type="checkbox"/> TURBO 41 <input type="checkbox"/> AIR MASS SENSOR 42 <input type="checkbox"/> RAIL PUMP 43 <input type="checkbox"/> FUEL INJECTOR 44 <input type="checkbox"/> CATALYTIC CONVERTER 45 <input type="checkbox"/> ENGINE 46 <input type="checkbox"/> THROTTLE-PEDAL SENSOR</p>

CUSTOMER COMPLAINT IN DETAIL

DIAGNOSIS CHECK RESULT (PHYSICAL ADDRESS - LOGICAL ADDRESS - DTC) Example: 190-62-45

*** Please fill in where appropriate ! ***

DEFECTIVE UNIT SHIPPING INFORMATION				REPAIRED UNIT SHIPPING INFORMATION			
DEALER	DISTRIBUTOR		SERVICE STATION	DISTRIBUTOR		DEALER	
UNIT SENT DD/MM/YY	UNIT RECEIVED DD/MM/YY	UNIT SENT DD/MM/YY	UNIT RECEIVED DD/MM/YY	UNIT SENT DD/MM/YY	UNIT RECEIVED DD/MM/YY	UNIT SENT DD/MM/YY	UNIT RECEIVED DD/MM/YY

✗ This is the original sheet for attachment when you send the defective unit. Take a copy for your file.