

NQD-DCBH-485460 KIT CONTENTS. INSPECTED BY:

BASE PLATE- STANDARD (NQD-071),

DOOR BAR- STANDARD (NQD-080)

HANDLE PIVOT- STANDARD (NQD-075)

HANDLE- STANDARD (NQD-092)

DOOR- DC-02 (NQD-DCBH-485460)

CENTER DEFLECTOR- STANDARD (NQD-100)

END DEFLECTOR- NONE

BRACKETS- (2) **UB-01** (2.187" TALL U-BRACKETS) /**INSTALLED WITH THE LONGER SLOT ATTACHED TO THE BASEPLATE**

(INSTALLED USING (2) 5/16-18 X 1 BOLTS/(4) SAE WASHERS/(2) NYLOCKS IN THE HOLES SHOWN)

HARDWARE KIT- A CONTENTS:

(4) 1/4-20 X 7/8 SOCKET HEAD BOLT

(4) 1/4-20 GR 8 NUTS

(2) 5/16-18 X 1 GR 5 HEX HEAD BOLT

(4) 5/16 SAE **or** 1/4 USS WASHER

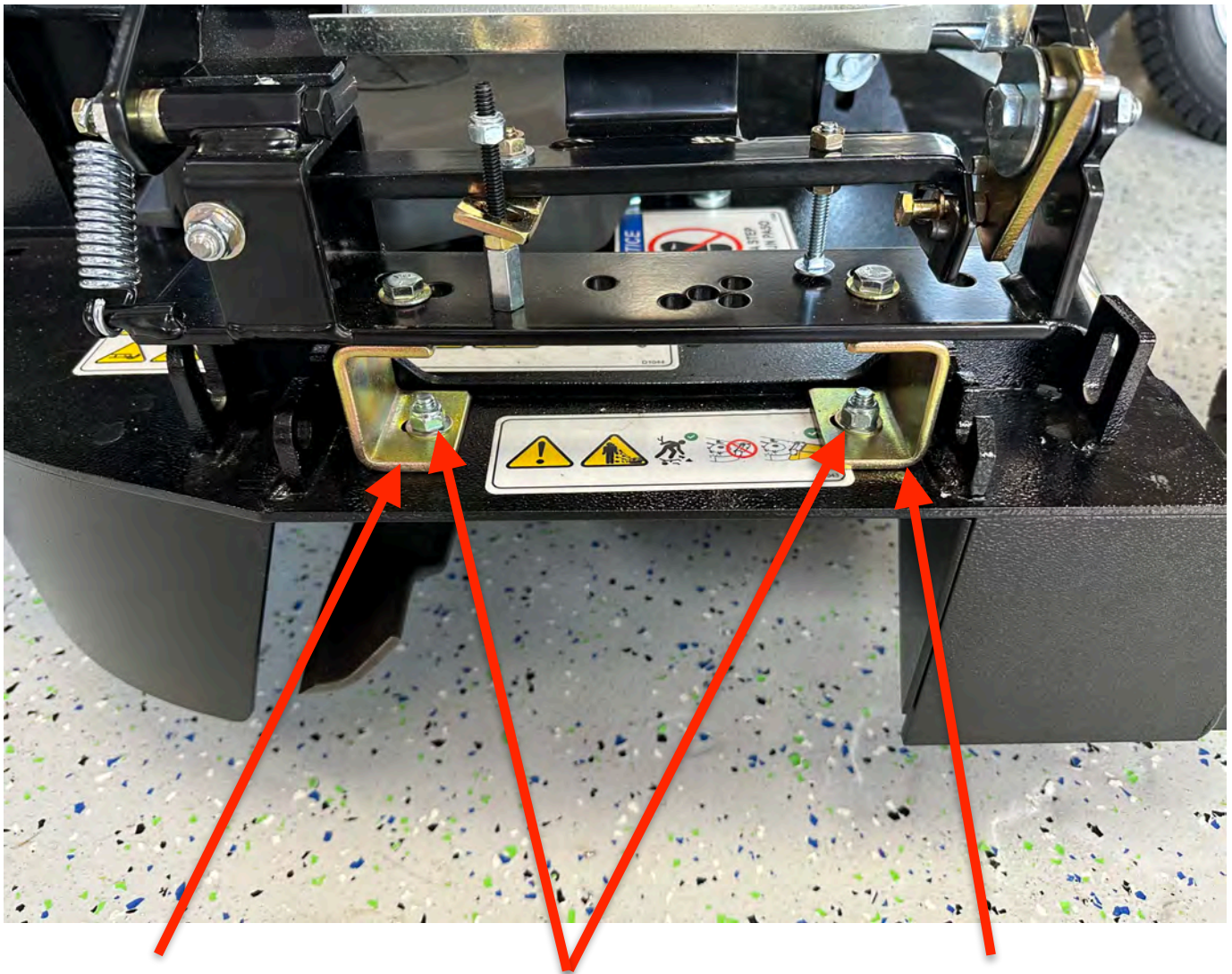
(2) 5/16-18 NYLOC NUT

(1) NQD-097-SPRING

(1) SPRING PULLER

NQD-DCBH-485460

DIXIE CHOPPER BLACK HAWK 48" 54" & 60" DECKS



MOUNTING BRACKET

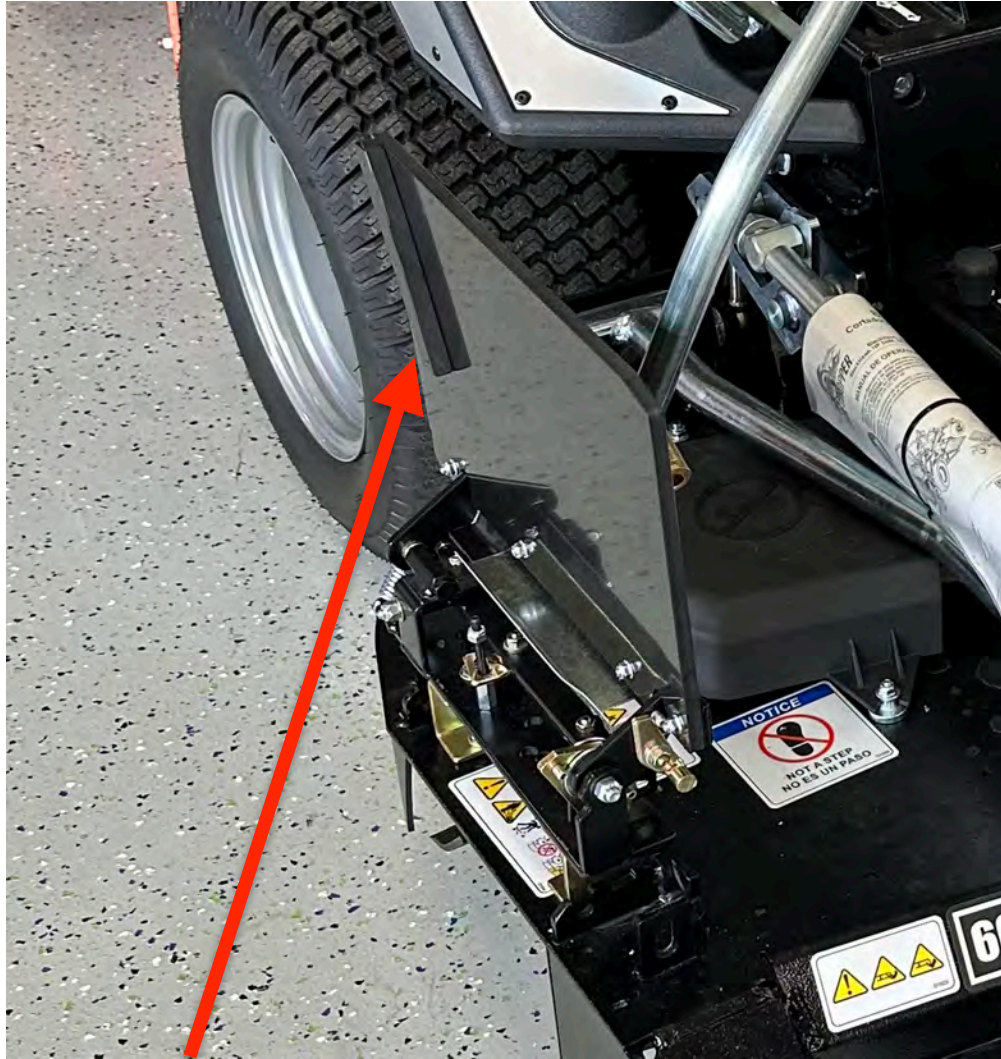
DRILL HERE

MOUNTING BRACKET

STEP 1

REMOVE FACTORY CHUTE AND PLACE QWIKCHUTE ON DECK. CLOSE DOOR ON QWIKCHUTE. CENTER IT UP ON THE DECK OPENING WHILE HOLDING DOOR AGAINST THE FACE OF OPENING (on 60" deck make sure door filler block seals rear gap correctly). WITHOUT LETTING THE UNIT MOVE OPEN THE DOOR AND USE THE MOUNTING BRACKETS AS TEMPLATE TO MARK THE HOLES WITH MARKER OR SCRIBE. REMOVE UNIT CENTER PUNCH AND DRILL TWO 5/16" DIAMETER HOLES. MOUNT QWIKCHUTE TO DECK USING (2) 5/16 X 1" BOLTS WITH WASHERS AND NUTS AS SUPPLIED. CHECK THE SEAL OF THE DOOR TO THE OPENING OF THE MOWER DECK PRIOR TO FULLY TIGHTENING THE MOUNTING HARDWARE.

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NOTE: FOR THE 48" AND 54" MODELS, PLEASE REMOVE THE PLASTIC DECK FILLER FROM THE DOOR. IT IS ONLY NEEDED FOR THE 60" AND WILL NOT ALLOW THE 48" AND 54" DOOR TO SEAL.

STEP 2

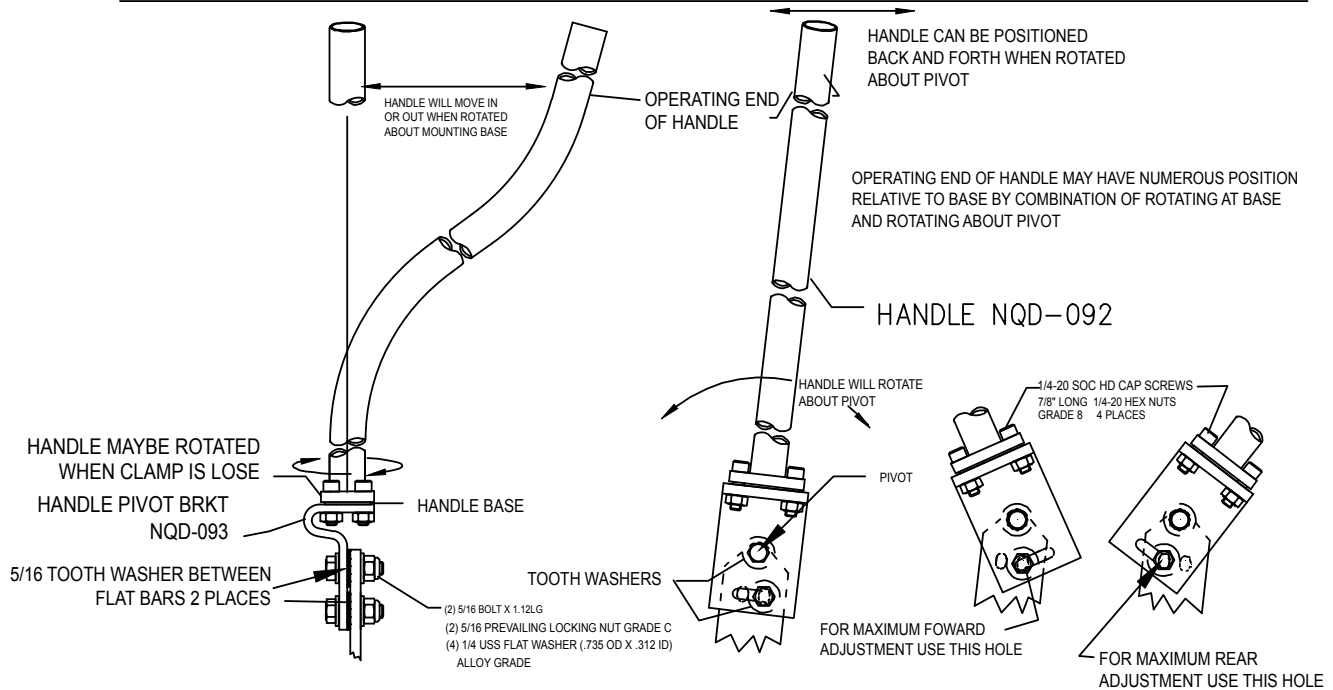
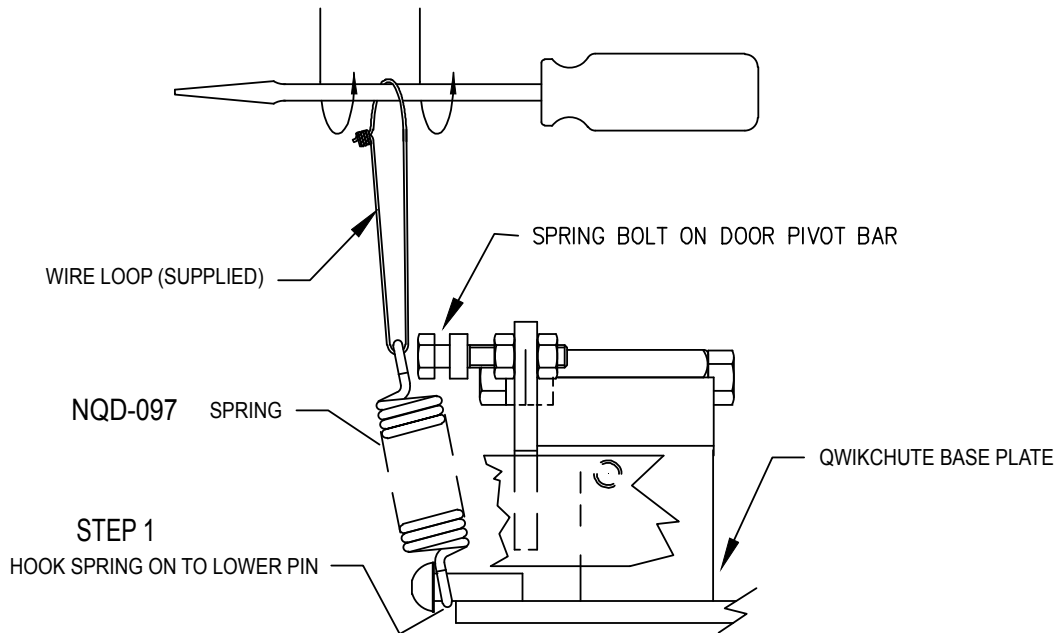
INSTALL SPRING (SEE INSTALLATION SHEET)

STEP 3

INSTALL HANDLE (SEE INSTALLATION SHEET)

SPRING INSTALLATION QWIKCHUTE NQD MODEL

STEP 2 LOOP FINGERS OVER SCREWDRIVER
BLADE AND LIFT SPRING ON TO SPRING BOLT
CAUTION --DO NOT OVER STRECH SPRING
DISCARD WIRE LOOP AFTER SPRING IS CONNECTED



HANDLE INSTALLATION AND ADJUSTMENT

QWIKCHUTE OPERATING PRECEDURE

OPEN FULLY- move handle away from operator quickly.

CLOSE FULLY- move handle toward operator quickly.

PARTIALLY OPEN- from close position move handle away from operator until stay bar swings into postion and release handle. To close from partially open position, quickly open and then close.

(some models do not have partial open feature.)

OIL ALL BEARING POINTS WEEKLY OR AS NEEDED.

WARRANTY
OIL ALL BEARING POINTS WEEKLY OR AS NEEDED

GTM Manufacturing, Inc. products are warranted to the original purchaser to be free from defects in materials and workmanship for a period of 90 days from the date of purchase.

Any part(s) of GTM products found to be defective within the warranty period shall, at GTM's option, be repaired or replaced without charge.

Warranty consideration is obtained by returning any GTM product/part believed to be defective to GTM Manufacturing, Inc. within the applicable warranty period. **Please call for authorization.**

GTM Manufacturing, Inc.
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GROVELAND, FL. 34736
(407) 654-6598
www.qwikchute.com

Warranty does not apply to conditions resulting from:

1. Damage(s) and/or costs associated with shipping and or/ transportation.
2. Lack of normal maintenance, adjustments, or service required for regular use of the product.
3. Modifications, service/repairs, parts or components not authorized by GTM.

GTM shall not be liable for any special, consequential, direct or indirect damages, and expressly states there are no implied warranties. Some states do not allow limitation of incidental or consequential damages, accordingly the above limitations and exclusions may not apply to you. This warranty provides you with specific legal rights which may vary from state to state.

IT IS THE OWNERS RESPONSIBILITY TO PROPERLY COMPLETE AND MAIL THE WARRANTY REGISTRATION CARD.

PROOF OF PURCHASE AND REGISTRATION WILL BE REQUIRED IN ORDER TO OBTAIN WARRANTY SERVICE.

WARRANTY REGISTRATION CARD

Name of Purchaser: _____

Street Address / P.O. Box: _____ County: _____

City: _____ State _____ Zip Code: _____

Model Number: _____ PURCHASE DATE: _____|_____|_____

Dealer Name: _____

Street Address: _____ County: _____

City: _____ State: _____ Zip Code: _____

Customer Received: Operators Manual () Safety Instructions () Demonstration ()

Customers Signature

Date