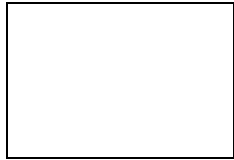
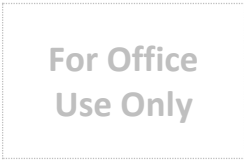




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Case No. 3:17-cv-01091-VAB (D. Conn.)*



## **CUSTOMER CONFIDENCE PROGRAM - REIMBURSEMENT CLAIM FORM**

**You only need to submit a Claim Form if you spent money prior to March 1, 2019 for certain repairs of a sliding door part that is covered under the Customer Confidence Program and have not already been reimbursed.** The parts covered under the Customer Confidence Program are:

- (i) Sliding Door Cable Sub-Assembly for 2011-2018 model year Toyota Siennas;
- (ii) Sliding Door Center Hinge Assembly for 2011-2018 model year Toyota Siennas;
- (iii) Fuel Door Pin and Fuel Door Hinge for 2011-2018 model year Toyota Siennas;
- (iv) Sliding Door Front Lock Assembly for 2011-2018 model year Toyota Siennas;
- (v) Sliding Door Rear Lock Assembly for 2011-2018 model year Toyota Siennas; and
- (vi) G04 Recall Remedy Kit for 2011 – 2016 model year Toyota Siennas.

Use this Claim Form only if you: (1) previously paid out-of-pocket for repairs that are related to internal functional concerns of the parts that impede the closing and opening operations of the sliding door in manual and power modes, as is covered under the Customer Confidence Program, for which you were not otherwise reimbursed, and the costs were incurred prior to **March 1, 2019**; (2) you are not otherwise excluded from the Class; and (3) you otherwise meet the terms and conditions specified in this Claim Form and the Settlement Agreement.

To determine whether you are a Class Member eligible to make a claim, or for more information regarding the class action settlement, please first visit [www.ToyotaSiennaDoorSettlement.com](http://www.ToyotaSiennaDoorSettlement.com). If you still have questions regarding the claims process, *call 1-833-305-3915*.

### **INSTRUCTIONS FOR COMPLETING THIS CLAIM FORM AND SUBMITTING A CLAIM FOR PAYMENT**

- 1) Check the Claim Form carefully to make sure all of the information is correct and that you have filled in any missing information. If you are submitting a Claim Form for multiple invoices and/or more than one Subject Vehicle, you can photocopy this Claim Form and attach a separate sheet containing the information requested, or, if you are submitting this Claim Form online, please check the box allowing you to include rows for multiple invoices and/or more than one Subject Vehicle.
- 2) Capitalized terms in this Claim Form have the same meaning as provided in the Settlement Agreement, which is available at [www.ToyotaSiennaDoorSettlement.com](http://www.ToyotaSiennaDoorSettlement.com).
- 3) Type or print legibly in blue or black ink. Do not use any highlighters. Provide **all** requested information to complete and submit this Claim Form, attach supporting documentation, as specified below, and sign the Claim Form.



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- 4) You must submit your completed Claim Form and any supporting documentation by mail or electronically no later than 60 days after the Court issues the Final Order and Final Judgment, which will occur, if approved, after the Fairness Hearing. Please check the settlement website, [www.ToyotaSiennaDoorSettlement.com](http://www.ToyotaSiennaDoorSettlement.com), which will be periodically updated. The completed Claim Form and any supporting documentation, can be submitted online at [www.ToyotaSiennaDoorSettlement.com](http://www.ToyotaSiennaDoorSettlement.com) or mailed to:

Simerlein, et al., v. Toyota Motor Corporation, et al., (D. Conn.)  
 c/o Toyota Settlement Notice Administrator  
 PO Box 230  
 Philadelphia, PA 19105-0230

**Important:** Keep a copy of your completed Claim Form and the supporting documents. Any documents you submit with your Claim Form will not be returned. Do not send original documents. If your claim is rejected for any reason, you will be notified.

**If you fail to timely and fully complete this Claim Form and submit the required supporting documentation, your Claim may be denied. If your Claim is denied, you will not receive a cash payment for your Claim. The Settlement Claims Administrator has the right to request verification of eligibility to participate in this Settlement.**

SECTION I – CLASS MEMBER AND SUBJECT VEHICLE INFORMATION													
<b>Name:</b>													
<i>Last</i>				<i>First</i>					<i>Middle Initial</i>				
<i>Vehicle Identification Number (VIN): (COMPLETE THIS BOX FIRST AS IT MAY POPULATE OTHER BOXES IN THIS CLAIM FORM AND BE SURE TO CORRECT ANY WRONG INFORMATION)</i>													
<i>Make</i>				<i>Model</i>				<i>Model Year of Vehicle</i>					
<b>Your Address:</b>													
Street Address : _____													
City: _____				State: _____				Zip Code: _____					
Phone Number: (____) _____ - _____													
E-mail Address: _____@_____.													



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**SECTION II – CLAIM INFORMATION**

1. Did you incur out-of-pocket expenses for repairs to parts covered under the Customer Confidence Program that are related to internal functional concerns that impede the closing and opening operations of the sliding door in manual and power modes, and for which you were not otherwise reimbursed, and the costs were incurred prior to **March 1, 2019**.

- No
- Yes

**If you answered “No” to question 1, you are not eligible to submit a Claim Form.**

If you answered “Yes,” complete the following:

The best way to show you incurred eligible out-of-pocket expenses is to enclose an invoice(s), service record(s), repair order(s), or any other document(s) that shows:

- Proof of ownership, which includes VIN, make and model
- Repair date
- Type of sliding door repair performed (including the parts repaired, condition and cause)
- Proof of payment and total amount paid (for both parts and labor)
- Facility name, address and phone number that performed the repair

INVOICE #1							
<i>Order Number:</i>		<i>Amount of Repair</i>					
		\$					
<i>Date of Repair:</i>							
___ ___ / ___ ___ / ___ ___							
<i>Name, City and State of Toyota Dealership Where Repair Occurred:</i>							
Dealership Name: _____							
Street Address : _____							
City: _____ State: ___ ___ Zip Code: _____							
<i>Description of Repair:</i>							
<i>Other/Specify (If Applicable):</i>							



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INVOICE #2 ( If Applicable)							
<i>Order Number:</i>				<i>Amount of Repair</i>			
				\$			
<i>Date of Repair:</i>							
_ _ _ / _ _ _ / _ _ _ _ _							
<i>Name, City and State of Toyota Dealership Where Repair Occurred:</i>							
Dealership Name: _____							
Street Address : _____							
City: _____		State: _____		Zip Code: _____			
<i>Description of Repair:</i>							
<i>Other/Specify (If Applicable):</i>							

**SECTION III – ATTESTATION**

By signing this Claim Form, you affirm that you **HAVE NOT** already been reimbursed for any of the above services except as reflected on the documents you have submitted. If you were only partially reimbursed, please enclose the document(s) that show how much you were reimbursed.

I affirm under the laws of the United States of America, that the information in this Claim Form is true and correct to the best of my knowledge, information and belief. I understand that my Claim Form may be subject to audit, verification and the Settlement Claims Administrator and Court review.

Signature \_\_\_\_\_

Date \_\_\_\_\_

**SECTION IV – CLAIM FORM COMPLETION AND SUBMISSION CHECKLIST**

- Be sure that your completed Claim Form includes your current name, address, telephone number, contact information and the vehicle identification number (VIN) of your Subject Vehicle.



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- Provide receipts or other evidence for the out-of-pocket expenses for repair of sliding door parts covered under the Customer Confidence Program, as instructed above.
- Keep a copy of your completed Claim Form (plus documentation submitted) for your records.
- Sign and date your Claim Form.
- Finally, you must submit your Claim Form and any supporting documentation, if available, for prior paid repair expenses for a covered condition to the Settlement Notice Administrator. The deadline to submit Claim Forms is sixty (60) days after the Court issues the Final Order and Final Judgment, which will occur, if approved, after the Fairness Hearing.

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**c/o Toyota Settlement Notice Administrator**  
**PO Box 230**  
**Philadelphia, PA 19105-0230**

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Toyota, the Settlement Claims Administrator, and/or the Settlement Notice Administrator are not responsible for any misdelivered, lost, illegible, damaged, destroyed, or otherwise not received mail or e-mail.

Claim Forms will be processed and approved in accordance with the terms of the Settlement Agreement. Please check the settlement website, [www.ToyotaSiennaDoorSettlement.com](http://www.ToyotaSiennaDoorSettlement.com), for updates.



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