

FRAME REPLACEMENT CLAIM FORM

**Toyota Tacoma (2005 to 2010), Toyota Tundra (2007-2008), and Toyota Sequoia (2005-2008)
(hereinafter the “Subject Vehicle(s)”)**

This form is only needed if you spent money for a frame replacement and have not already been reimbursed. Use this Claim Form only if you: (1) previously paid out-of-pocket for frame replacement incurred on your Subject Vehicle to address a condition that satisfies the Rust Perforation Standard in the Frame Inspection Protocol on the Subject Vehicles for which you were not otherwise reimbursed, and the costs were incurred prior to June 8, 2018; (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.

You may submit only one Claim for each Subject Vehicle for which you are seeking payment in this class action settlement. 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.Toyotaframesettlement.ca. If you still have questions regarding the claims process, call 1-866-343-1858.

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

- 1) You can complete this Claim Form online at www.Toyotaframesettlement.ca, when you type your VIN (Vehicle Identification Number) in Section I (Information on Class Member and Subject Vehicle) below, some of the boxes in this Claim Form will be automatically filled in. Check the 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 for 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 on-line, please check the box allowing you to include rows for 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.Toyotaframesettlement.ca.
- 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.
- 4) **Your completed Claim Form must be submitted electronically (by clicking the “Submit Claim Form” button below) no later than November 19, 2018 (Subject to Courts’ approval) or postmarked no later than November 19, 2018 (Subject to Courts’ approval). The completed Claim Form can be submitted online at www.Toyotaframesettlement.ca, emailed to toyotaframesettlement@crowco.ca or mailed to:**

Toyota Frame Settlement
c/o Crawford Class Action Services
Suite 3-505, 133 Weber St N
Waterloo ON N2J 3G9
Fax: 1-888-842-1332

- 5) **You must review, sign and date Section II (Attestation) below.**

Toyota and/or the Settlement Notice and Claims Administrator are not responsible for any misdelivered, lost, illegible, damaged, destroyed, or otherwise not received mail, including, but not limited to, any responses to requests for verification.

IF YOU FILE YOUR CLAIM FORM ONLINE, YOU DO NOT NEED TO SUBMIT A PAPER CLAIM FORM.

Failure to timely complete all relevant portions of the Claim Form may result in the denial of your Claim, and you will receive no cash payment for your claim. The Settlement Notice and Claims Administrator has the right to request verification of eligibility, and any additional documentation necessary to process the claim.

SECTION I: Information on Class Member and Subject Vehicle		
<i>Last Name</i>	<i>First Name</i>	<i>Middle Initial</i>
<i>Vehicle Identification Number (VIN):</i>	<i>Telephone Number:</i>	
<i>Make, Model, and Model Year of Vehicle</i>		
<i>Street Address</i>		
<i>City:</i>	<i>Province / Territory:</i>	<i>Postal Code:</i>
E-mail		Address:
_____		_____
@		_____

SECTION II: Claim Information
<p>1. Did you incur any out-of-pocket expense for frame replacement to your Subject Vehicle to address frame perforation issues that satisfies the Rust Perforation Standard that were not otherwise reimbursed?</p> <p><input type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p> <p>If you answered “No” to question 1, you are not eligible to submit a claim.</p> <p>If you answered “Yes,” complete the following:</p> <p>FRAME REPLACEMENT</p> <p><u><i>The best way to show you incurred out-of-pocket expenses for frame replacement that satisfies the Rust Perforation Standard is to enclose an invoice(s) or any other document(s) that shows:</i></u></p> <ul style="list-style-type: none"> • Proof of ownership, which includes VIN, make and model • Frame replacement date • Type of frame replacement performed (including the parts replaced, condition and cause) • Proof of payment and total amount paid (for both parts and labor) • Facility name, address and phone number that performed the replacement

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INVOICE #1							
Replacement Order Number (if any):				Amount paid for replacement:			
	\$						
Date of Replacement:							
Name, City and Province / Territory of Dealership or Mechanic Where Replacement Occurred:							
Name: _____							
City: _____ Province / Territory: _____ Postal Code: _____							
Description of Replacement:							
Other/Specify (If Applicable):							

INVOICE #2 (If Applicable)							
Replacement Order Number (if any):				Amount paid for replacement:			
	\$						
Date of Replacement:							
Name, City and Province / Territory of Dealership or Mechanic Where Replacement Occurred:							
Name: _____							
City: _____ Province / Territory: _____ Postal Code: _____							
Description of Replacement:							
Other/Specify (If Applicable):							

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INVOICE #3 (If Applicable)							
Replacement Order Number (if any):				Amount paid for replacement:			
	\$						
Date of Replacement:							
Name, City and Province / Territory of Dealership or Mechanic Where Replacement Occurred:							
Name: _____							
City: _____ Province / Territory: _____ Postal Code: _____							
Description of Replacement:							
Other/Specify (If Applicable):							

SECTION III: Attestation	
I declare or affirm, under penalty of perjury under the laws of Canada, that the information in this Claim form is true and correct to the best of my knowledge, information and belief, that I can make this claim, and have the authority to submit this Claim Form. I understand that my Claim Form may be subject to audit, verification and Court review.	
SIGNED: _____	DATE: _____
<input type="checkbox"/> Please check this box if you are filing your Claim Form electronically. This represents your signature <p style="text-align: center;"><u>You must fill out the date, above</u></p>	
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SUBMIT CLAIM FORM

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