

Do you still own or lease the Class Vehicle? Yes No

If no, on what date did you sell or return the vehicle? / /

If yes, current mileage on the Class Vehicle?

Please enter the date of the Service Visit on which the qualifying Software Flash that is the basis for this claim was performed: / /

Please select the labor code or labor description for the Software Flash performed on this Service Visit (if more than one Software Flash was performed, you only need to select one labor code or labor description):

<input type="radio"/> 110333A	<input type="radio"/> 110405A	<input type="radio"/> 110513A	<input type="radio"/> 110524A	<input type="radio"/> 110902A
<input type="radio"/> 131102A	<input type="radio"/> 131104A	<input type="radio"/> 131108A	<input type="radio"/> 131109A	<input type="radio"/> 131110A
<input type="radio"/> 150090M	<input type="radio"/> 150090N	<input type="radio"/> 150090P	<input type="radio"/> 150090Q	<input type="radio"/> 150120H
<input type="radio"/> 160109C	<input type="radio"/> 160109D	<input type="radio"/> 160129A	<input type="radio"/> MT131102	<input type="radio"/> R08101
<input type="radio"/> 14M01DD	<input type="radio"/> 14M01E	<input type="radio"/> 14M01EE	<input type="radio"/> 14M01GG	<input type="radio"/> 14M01H
<input type="radio"/> 120104A	<input type="radio"/> 130405A	<input type="radio"/> 130405B	<input type="radio"/> 130405C	<input type="radio"/> 130406A
<input type="radio"/> 130904A	<input type="radio"/> 130904B	<input type="radio"/> 130904C	<input type="radio"/> 140131A	<input type="radio"/> 140131B
<input type="radio"/> 140131C	<input type="radio"/> 140131D	<input type="radio"/> 140131E	<input type="radio"/> 150017A	<input type="radio"/> 150090H
<input type="radio"/> 150090L	<input type="radio"/> 150120L	<input type="radio"/> 150120M	<input type="radio"/> 150120N	<input type="radio"/> 150120P
<input type="radio"/> 150120Q	<input type="radio"/> 160044A	<input type="radio"/> 160109A	<input type="radio"/> 160109B	<input type="radio"/> R08102
<input type="radio"/> R11021	<input type="radio"/> 14M01A	<input type="radio"/> 14M01AA	<input type="radio"/> 14M01BB	<input type="radio"/> 14M01C
<input type="radio"/> 14M01CC	<input type="radio"/> 14M01D	<input type="radio"/> 14M01L	<input type="radio"/> 14M01M	<input type="radio"/> 14M01N
<input type="radio"/> 14M01P	<input type="radio"/> 14M01Q	<input type="radio"/> 14M02B	<input type="radio"/> 14M02C	<input type="radio"/> 14M02D
<input type="radio"/> If none of the above codes are stated on your repair order, please provide a labor description or TSB number (e.g., reprogram, reflash, reburn, or update TCM): <input type="text"/>				

Please attach the service records for this Service Visit.

If you are identified as the person requesting the repair on the service records for this Service Visit, you do not need to attach other proof that you owned the Class Vehicle as of the time of this Service Visit. If you are not identified as the person requesting the repair, you must attach a vehicle registration identifying you as the vehicle owner as of the date of this Service Visit (or as of a later date).

Affirmation

I attest to and affirm under penalty of perjury that the information stated above is accurate to the best of my knowledge, that the documentation I have provided to support this claim is authentic, and that I owned or leased the Class Vehicle at the time of each Service Visit and corresponding Software Flash on which this claim is based.

Signature: _____

Dated: _____

Print Name: _____

Please send this completed form, and all supporting documentation, to the address set forth at the top of this form.

If the information or documentation you provide is incomplete, your claim may be rejected.

