

HYUNDAI CLAIM FORM

Six Steps to Make a Claim

In re: Hyundai and Kia Engine Litigation II, No. 8:18-cv-02223-JLS-JDE (C.D. Cal.)

[1] Provide your name and contact information below. You must notify the Settlement Administrator if your contact information changes after you submit this Claim Form.

First Name:

MI: Last Name:

Address 1:

Address 2:

City:

State: Zip Code:

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Email:

Phone:

[2] Provide your Vehicle Identification Number (“VIN”).

The VIN is located on a small placard on the top of the dashboard and is visible through the driver's side corner of the windshield. It also appears on your vehicle registration card, and probably appears on your vehicle insurance card. Your VIN should have 17 characters, a combination of both letters and numbers.

VIN:

To be entitled to certain Settlement reimbursement benefits, you must have either obtained a Qualifying Repair, or experienced a Qualifying Fire or Qualifying Failure, as explained in the Class Notice.

- Qualifying Repair: (1) any repairs to fix engine hole-in-block scenarios (i.e., the connecting rod punctures a hole in the engine block), (2) engine seizure (unrelated to pre-existing oil consumption issues), or (3) Qualifying Fire (see below). Qualifying Repair also includes work performed to address symptoms associated with connecting rod bearing failure where the vehicle received a diagnosis of (i) abnormal bearing noise in accordance with Hyundai's inspection protocols, (ii) stall was caused by engine seizure with a failed bearing clearance test, or (iii) P1326 warning light.
- Qualifying Fire: an engine compartment fire caused by engine hole-in-block scenarios or engine seizure.
- Qualifying Failure: an engine stall or other vehicle incident, caused by engine hole-in-block scenarios or engine seizure.

Note: An engine failure is not a Qualifying Failure and an engine compartment fire is not a Qualifying Fire if not caused by engine short-block manufacturing issues (examples of issues not covered under the Settlement include a fire caused by a collision, electrical, or fuel issues; or a stall caused by a fuel pump, oxygen sensor, timing, or electrical system malfunction).

[3] Indicate the reimbursement(s) you are claiming, the amount of the reimbursement you are requesting, and enclose the required documents. Note: More than one type of reimbursement may apply to you.

I AM REQUESTING COMPENSATION FOR OUT-OF-POCKET TRANSPORTATION EXPENSES (E.G., RENTAL CAR, RIDESHARE) OF UP TO \$80/DAY AND/OR TOWING COSTS IN FULL THAT WERE REASONABLY RELATED TO OBTAINING QUALIFYING REPAIRS AT AN AUTHORIZED HYUNDAI DEALERSHIP THAT OCCURRED WITHIN 15 YEARS OR 150,000 ODOMETER MILES, FROM THE DATE OF THE VEHICLE'S ORIGINAL RETAIL DELIVERY, WHICHEVER OCCURS FIRST

Claims under this benefit must be submitted within 90 days of when the expense was incurred or paid.

- To be eligible for Transportation and/or Towing reimbursement, your expenses must have been incurred within 15 business days before delivery of the vehicle to the dealership for the Qualifying Repair and within 3 business days after you were notified that your vehicle was ready to be picked up following completion of the Qualifying Repair.
- For purposes of this claim, your transportation expenses may have been more than \$80/day, but the maximum daily compensation under the Settlement is capped at \$80/day.

Date of the Qualifying Repair at an Authorized Hyundai Dealership:

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D	D		
Y	Y	Y	Y

Odometer Mileage on the Date of the Qualifying Repair:

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Transportation

Check one or more of the boxes below showing what kind of actual transportation expenses you incurred in relation to the Qualifying Repair and provide the total amount you spent on these transportation expenses for which you are requesting compensation (up to a maximum of \$80/day):

Rental Car \$

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 Rideshare \$

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 Other Transportation \$

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Date First Out-of-Pocket Expense was incurred or paid:

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M	M		
D	D		
Y	Y	Y	Y

Total Number of Days you used Rental/Rideshare or other Transportation:

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Prior Hyundai Campaign and/or Customer Satisfaction Goodwill
Reimbursement Amount Related to Transportation (if any): \$

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Prior Insurance Reimbursement Amount Related to Transportation (if any): \$

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Towing

Check the box below if you incurred towing expenses in relation to the Qualifying Repair and provide the total amount you spent on towing for which you are requesting reimbursement:

Towing \$

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Date of Tow:

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M	M		
D	D		
Y	Y	Y	Y

Date Out-of-Pocket Expense was incurred or paid:

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M	M		
D	D		
Y	Y	Y	Y

Prior Hyundai Campaign and/or Customer Satisfaction Goodwill
Reimbursement Amount Related to Towing (if any): \$

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Prior Insurance Reimbursement Amount Related to Towing (if any): \$

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Required Documentation:

- Proof of Ownership: A copy of your vehicle title, a copy of your registration card, OR other document(s) showing that you own or lease the vehicle that was repaired;
- Proof of Expense(s) Incurred: A receipt, final rental agreement, or other document(s) showing the final expenses amount paid to a verified business entity (e.g., a rental car, ride-sharing trip(s), or towing service) and date(s) of your purchase(s);
- Proof of Payment: A credit card receipt, credit card statement, bank statement, cleared check, OR other document(s) showing the amount that you paid for the transportation or towing(s);
- Prior Reimbursement: If you previously received any reimbursement for the transportation or towing, you must provide documentation of this with your Claim (for example, insurance paperwork or prior campaign reimbursement and/or customer satisfaction payments); and
- Proof of Qualifying Repair: A repair invoice or document(s) that shows the nature of the corresponding Qualifying Repair(s) you received, the amount paid, the name and contact information of the Hyundai Dealership that repaired your vehicle, and the date of the Qualifying Repair(s).

I AM REQUESTING COMPENSATION FOR INCONVENIENCE DUE TO QUALIFYING REPAIR DELAYS EXCEEDING 60 DAYS FOR QUALIFYING REPAIRS PERFORMED BY A HYUNDAI DEALERSHIP THAT OCCURRED WITHIN 15 YEARS OR 150,000 ODOMETER MILES FROM THE DATE OF THE VEHICLE'S ORIGINAL RETAIL DELIVERY, WHICHEVER OCCURS FIRST.

Claims under this benefit must be submitted within 90 days of when the Qualifying Repair was completed.

Start Date of the Qualifying Repair at an Authorized Hyundai Dealership:

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Completion Date of the Qualifying Repair at an Authorized Hyundai Dealership:

M	M	D	D	Y	Y	Y	Y

Number of Days it took for Qualifying Repair Completion:

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Odometer Mileage on the Date of the Qualifying Repair:

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Prior Hyundai Campaign and/or Customer Satisfaction Goodwill
Reimbursement Amount (if any):

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Payment Method Options for Inconvenience Compensation Benefit (Choose ONE):

I AM REQUESTING A CASH PAYMENT FOR THIS BENEFIT. (If your Qualifying Repair took between 61 and 180 days, you will be entitled to \$75. If your Qualifying Repair took more than 181 days, you will be entitled to \$100, plus an additional \$100 for each additional 30-day period after 210 days) *Note: Cash payment will be issued in the form of a Debit / Prepaid Card or Check based on your selection in step [4] of this form.*

I AM REQUESTING A DEALER SERVICE CARD FOR 150% OF THE CASH PAYMENT THAT I WOULD OTHERWISE BE ENTITLED TO FOR THIS BENEFIT. (Dealer Service Card only good for use toward merchandise, parts, or service at an Authorized Hyundai Dealer.)

Required Documentation:

- Proof of Ownership: A copy of your vehicle title, a copy of your registration card, OR other document(s) showing that you own or lease the vehicle that was repaired;
- Proof of Payment: A credit card receipt, credit card statement, bank statement, cleared check, receipt from the dealership, OR other document(s) showing the amount that you paid for the Qualifying Repair(s);
- Prior Payment: If you previously received payment from Hyundai for delay in connection with the Qualifying Repair(s), you must provide documentation of this with your Claim; and
- Proof of Qualifying Repair: A repair order or other document(s) that show the nature of the corresponding Qualifying Repair and identifies the start and end date of your corresponding Qualifying Repair.

**IAM REQUESTING COMPENSATION FOR TRANSPORTATION AND/OR TOWING BECAUSE I
EXPERIENCED A QUALIFYING FAILURE OR QUALIFYING FIRE THAT OCCURRED WITHIN 150 MILES
FROM MY HOME AND ALSO WITHIN 15 YEARS OR 150,000 ODOMETER MILES FROM THE DATE OF
THE VEHICLE'S ORIGINAL RETAIL DELIVERY, WHICHEVER OCCURS FIRST**

Claims under this benefit must be submitted within 90 days of when the expense was incurred or paid.

- If the Qualifying Failure or Qualifying Fire occurred within 150 miles of your home at the time of the event, you can get up to \$125 for out-of-pocket rental car, ride-share, or other transportation expenses incurred on the day of the Qualifying Failure or Qualifying Fire. You are also eligible for full reimbursement of reasonable towing expenses related to the incident. For purposes of this claim, "your home" shall be the address on your driver's license OR other document(s) showing your residential address at the time of the Qualifying Failure or Qualifying Fire.
- Your transportation expenses incurred on the day of the incident may have been more than \$125, but the maximum transportation reimbursement under the Settlement is capped at \$125.

Check if you experienced a: Qualifying Failure OR Qualifying Fire

Date of the Qualifying Failure or Qualifying Fire: - -

Odometer Mileage on the Date of the Qualifying Failure or Qualifying Fire:

Please state where the Qualifying Failure or Qualifying Fire occurred. Provide the nearest address, or the nearest location (e.g., highway and nearest milepost marker), where you experienced the Qualifying Failure or Qualifying Fire):

Address 1:

Address 2:

City:

State:

Zip Code:

$$\boxed{} \quad \boxed{} \quad \boxed{} \quad \boxed{} \quad - \quad \boxed{} \quad \boxed{}$$

Check which of the statements best applied to you at the time of the Qualifying Failure or Qualifying Fire:

I resided at my current address that's reflected at the beginning of this form.

My residential address at the time was:

Address 1:

1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31 32 33 34 35 36 37 38 39 40 41 42 43 44 45 46 47 48 49 50 51 52 53 54 55 56 57 58 59 60 61 62 63 64 65 66 67 68 69 70 71 72 73 74 75 76 77 78 79 80 81 82 83 84 85 86 87 88 89 90 91 92 93 94 95 96 97 98 99 100

Address 2:

City:

State:

Zip Code:

$$\begin{array}{|c|c|c|c|c|} \hline \quad & \quad & \quad & \quad & \quad \\ \hline \end{array} - \begin{array}{|c|c|c|} \hline \quad & \quad & \quad \\ \hline \end{array}$$

Transportation

Check one or more of the boxes below showing what kind of transportation expenses you incurred in relation to the Qualifying Failure or Qualifying Fire and provide the total amount you spent on these transportation expenses for which you are requesting reimbursement (up to a maximum of \$125):

Rental Car \$

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Rideshare \$

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Other Transportation \$

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Date Out-of-Pocket Expense was incurred or paid:

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M	M
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D	D
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Y	Y	Y	Y
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Prior Hyundai Campaign and/or Customer Satisfaction Goodwill
Reimbursement Amount for Transportation (if any): \$

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Prior Insurance Reimbursement Amount for Transportation (if any): \$

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Towing

Check the box below if you incurred towing expenses in relation to the Qualifying Failure or Qualifying Fire and provide the total amount you spent on towing for which you are requesting reimbursement:

Towing \$

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Date of Tow:

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M	M
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D	D
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Y	Y	Y	Y
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Date Out-of-Pocket Expense was incurred or paid:

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M	M
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D	D
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Y	Y	Y	Y
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Prior Hyundai Campaign and/or Customer Satisfaction Goodwill
Reimbursement Amount Related to Towing (if any): \$

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Prior Insurance Reimbursement Amount Related to Towing (if any): \$

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Required Documentation:

- Proof of Ownership: A copy of your vehicle title, a copy of your registration card, OR other document(s) showing that you own or lease the vehicle that had a Qualifying Failure or Qualifying Fire;
- Proof of Qualifying Failure/Fire: A repair facility diagnosis, police report, insurance documents, OR other document(s) showing you experienced a Qualifying Failure or Qualifying Fire;
- Proof of Expense(s) Incurred: A receipt or other document(s) showing what was purchased (e.g., a rental car, ride-sharing trip(s), or towing service) and date(s) of your purchases(s);
- Proof of Payment: A credit card receipt, credit card statement, bank statement, cleared check, OR other document(s) showing the amount that you paid for the purchase(s);
- Prior Reimbursement: If you previously received any reimbursement for the purchase(s), you must provide documentation of this with your Claim (for example, insurance paperwork or prior campaign reimbursement and/or customer satisfaction payments); and
- Proof of Residence: A copy of your driver's license OR other document(s) showing your residential address at the time of the Qualifying Failure or Qualifying Fire.

I AM REQUESTING REIMBURSEMENT FOR INCIDENTALS AND/OR TOWING BECAUSE I EXPERIENCED A QUALIFYING FAILURE OR QUALIFYING FIRE THAT OCCURRED MORE THAN 150 MILES FROM MY HOME AND ALSO WITHIN 15 YEARS OR 150,000 ODOMETER MILES FROM THE DATE OF THE VEHICLE'S ORIGINAL RETAIL DELIVERY, WHICHEVER OCCURS FIRST.

Claims under this benefit must be submitted within 90 days of when the expense was incurred or paid.

- If the Qualifying Failure or Qualifying Fire occurred **more than 150 miles away from your home** at the time of the event, you can get up to \$300 for the first day, \$200 for the second day, and \$100 for the third day for out-of-pocket rental car, ride-share, or other transportation costs, lodging, and reasonable meal expenses. You are also eligible for full reimbursement of reasonable towing expenses related to the incident. For purposes of this claim, "your home" shall be the address on your driver's license OR other document(s) showing your residential address at the time of the Qualifying Failure or Qualifying Fire.
- Your incidentals incurred during the first three days of the incident may have been more than \$300/200/100 for each respective day, but the maximum daily reimbursement under the Settlement is capped at either \$300/200/100 for each respective day, as described above.

Check if you experienced a: Qualifying Failure **OR** Qualifying Fire

Date of the Qualifying Failure or Qualifying Fire: - -

Odometer Mileage on the Date of the Qualifying Failure or Qualifying Fire:

Please state where the Qualifying Failure or Qualifying Fire occurred. Provide the nearest address, or the nearest location (e.g., highway and nearest milepost marker), where you experienced the Qualifying Failure or Qualifying Fire):

Address 1:

Address 2:

City:

State:

Zip Code:

$$\boxed{} \quad \boxed{} \quad \boxed{} \quad \boxed{} \quad \boxed{} \quad - \quad \boxed{} \quad \boxed{} \quad \boxed{} \quad \boxed{}$$

Check which of the statements best applied to you at the time of the Qualifying Failure or Qualifying Fire:

I resided at my current address that's reflected at the beginning of this form.

My residential address at the time was:

Address 1:

Address 2:

City:

State:

Zip Code:

$$\boxed{} \quad \boxed{} \quad \boxed{} \quad \boxed{} \quad \boxed{} \quad - \quad \boxed{} \quad \boxed{} \quad \boxed{} \quad \boxed{}$$

Check the box below identifying how many days it took you to get home after your Qualifying Failure or Qualifying Fire:

One Day Two Days Three or More Days

Transportation, Meals & Lodging

Check one or more of the boxes showing what kind of transportation, meals, and lodging expenses you incurred in relation to the Qualifying Failure or Qualifying Fire and provide the total amount you spent on these expenses for which you are requesting reimbursement (up to \$300 for the first day, \$200 for the second day, and \$100 for the third day):

Rental Car \$ • Meals \$ •

Rideshare \$ • Lodging \$ •

Other Transportation \$ •

Date First Out-of-Pocket Expense was incurred or paid: - -
 M M - D D - Y Y Y Y

Prior Hyundai Campaign and/or Customer Satisfaction Goodwill
Reimbursement Amount for Transportation (if any): \$ •

Prior Insurance Reimbursement Amount for Transportation (if any): \$ •

Towing

Check the box below if you incurred towing expenses in relation to the Qualifying Failure or Qualifying Fire and provide the total amount you spent on towing for which you are requesting reimbursement:

Towing \$ •

Date of Tow: - -
 M M - D D - Y Y Y Y

Date Out-of-Pocket Expense was incurred or paid: - -
 M M - D D - Y Y Y Y

Prior Hyundai Campaign and/or Customer Satisfaction Goodwill
Reimbursement Amount Related to Towing (if any): \$ •

Prior Insurance Reimbursement Amount Related to Towing (if any): \$ •

Required Documentation:

- Proof of Ownership: A copy of your vehicle title, a copy of your registration card, OR other document(s) showing that you own or lease the vehicle that had a Qualifying Failure or Qualifying Fire;
- Proof of Qualifying Failure/Fire: A repair facility diagnosis, police report, insurance documents, OR other document(s) showing you experienced a Qualifying Failure or Qualifying Fire;
- Proof of Expense(s) Incurred: A receipt or other document(s) showing what was purchased (e.g., a rental car, ride-sharing trip(s), towing service, lodging, or meals), and date(s) of your purchases(s);
- Proof of Payment: A credit card receipt, credit card statement, bank statement, cleared check, OR other document(s) showing the amount that you paid for the purchase(s);
- Prior Reimbursement: If you previously received any reimbursement for the purchase(s), you must provide documentation of this with your Claim (for example, insurance paperwork or prior campaign reimbursement and/or customer satisfaction payments); and
- Proof of Residence: A copy of your driver's license OR other document(s) showing your residential address at the time of the Qualifying Failure or Qualifying Fire.

I AM REQUESTING REIMBURSEMENT FOR A CLASS VEHICLE THAT EXPERIENCED A QUALIFYING FIRE RESULTING IN THE LOSS OF MY VEHICLE THAT OCCURRED WITHIN 15 YEARS OR 150,000 ODOMETER MILES FROM THE DATE OF THE VEHICLE'S ORIGINAL RETAIL DELIVERY, WHICHEVER OCCURS FIRST.

Claims under this benefit must be submitted within 90 days of the Qualifying Fire

- Compensation is based on the maximum Black Book value (i.e., private party/very good) of the Class Vehicle at the time of loss minus any actual value received. If the actual amount received from the sale or trade-in exceeds the maximum Black Book value, no reimbursement or goodwill will be provided.
- In addition to reimbursement for the vehicle, you are eligible to receive an additional \$150 goodwill payment.

Date of Qualifying Fire:

M	M

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D	D

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Y	Y	Y	Y	Y

Odometer Mileage on the Date of the Qualifying Fire:

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State Where Qualifying Fire Occurred:

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Proceeds or Actual Value Received for Vehicle as a result of Qualifying Fire (insurance payment, sale to salvage yard, etc.):

\$

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Prior Hyundai Campaign and/or Customer Satisfaction

Goodwill Compensation/Reimbursement Amount for Loss of Vehicle (if any): \$

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Required Documentation:

- Proof of Ownership: A copy of your vehicle title, a copy of your registration card, OR other document(s) showing that you owned or leased the vehicle that experienced a Qualifying Fire;
- Proof of Qualifying Fire: A repair facility diagnosis, police report, insurance documents, OR other document(s) showing you experienced a Qualifying Fire; and
- Prior Reimbursement: If you previously received any reimbursement or value in connection with your Qualifying Fire, you must provide documentation of this with your Claim (for example, insurance paperwork or prior campaign reimbursement and/or customer satisfaction payments).

AFTER JUNE 7, 2023, I (1) LOST FAITH IN MY VEHICLE AS A RESULT OF THIS SETTLEMENT, (2) EXPERIENCED A QUALIFYING FAILURE OR QUALIFYING FIRE WITHIN 15 YEARS OR 150,000 ODOMETER MILES, FROM THE DATE OF ORIGINAL RETAIL DELIVERY, WHICHEVER OCCURS FIRST; (3) SOLD MY VEHICLE, AND (4) THEN PURCHASED A REPLACEMENT HYUNDAI VEHICLE FROM AN AUTHORIZED HYUNDAI DEALERSHIP.

Claims under this benefit must be submitted within 90 days of the Qualifying Fire

- To qualify for this compensation, after June 7, 2023, you must have (1) lost faith in the vehicle; (2) experienced a Qualifying Failure or Qualifying Fire within 15 years or 150,000 odometer miles from date of original retail delivery; (3) sold your vehicle in an arm's length transaction; **AND** (4) purchased a replacement Hyundai vehicle from an authorized Hyundai dealership.
- If you choose this option, you are eligible for a rebate which shall be calculated as the actual loss by comparing sales documentation to the maximum Black Book value (i.e., private party/very good) of your vehicle at the time of the Knock Sensor Detection System campaign launch for up to the following amounts:
 - For model year 2010, 2011, and 2012 Class Vehicles: \$2,500
 - For model year 2013 and 2014 Class Vehicles: \$2,000
 - For model year 2015 and 2016 Class Vehicles: \$1,500
 - For model year 2017, 2018, 2019, 2020, and 2021 Class Vehicles: \$1,000

Check if you experienced a: Qualifying Failure **OR** Qualifying Fire

Date of the Qualifying Failure or Qualifying Fire: - -

Odometer Mileage on the Date of the Qualifying Failure or Qualifying Fire: _____

Provide the following information about the Sale/Trade-In of your Class Vehicle:

Odometer Mileage of Class Vehicle at time of Sale/Trade-In:

State Where Sale/Trade-In Occurred:

Total Amount Received for Class Vehicle from the Sale/Trade-In: \$

Provide the VIN of the Hyundai vehicle you bought from a Hyundai dealership to replace your vehicle that experienced a Qualifying Failure or Qualifying Fire:

Replacement Hyundai Vehicle VIN:

Required Documentation:

- Proof of Ownership: A copy of your vehicle title, a copy of your registration card, OR other document(s) showing that you owned or leased the vehicle that you then sold or traded in;
- Proof of Qualifying Failure/Fire: A repair facility diagnosis, police report, insurance documents, OR other document(s) showing you experienced a Qualifying Failure or Qualifying Fire; and
- Proof of Sale/Trade-In: Paperwork showing what you received for your vehicle as a sale or trade-in; and
- Proof of Replacement: Sales documents showing you purchased a replacement Hyundai vehicle from an authorized Hyundai dealership

Continue to Next Page, you MUST Complete Steps [4], [5], and [6]

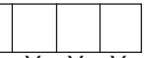
[4] Reimbursement Payment Method (Choose ONE Option):

- I request payment by Check.
- I request payment by Debit / Prepaid Card.

[5] Sign and Date:

The information on this form is true and correct to the best of my knowledge. I agree to participate in the Settlement. I authorize any dealership that serviced my vehicle to release records to Hyundai to help pay my claim. If I am seeking to participate in inconvenience-due-to-repairs program, I attest under penalty of perjury that I felt inconvenienced. If I am seeking to participate in the rebate program, I attest under penalty of perjury that I have lost faith in my vehicle.

Signature: 

Date:  -  - 
M M D D Y Y Y Y

[6] Submit:

You may either:

1. Email the completed form with supporting documentation to info@hma-e2settlement.com or;
2. Mail the completed form with supporting documentation enclosed to the following mailing address:

Hyundai E2 Settlement
PO Box 429
East Brunswick, NJ 08816-9998

Claims can also be submitted electronically at www.HyundaiEngineClassSettlement.com