

April 21, 2004

Grange Insurance
Mr. Rob Shaffer
P.O. Box 1218
Columbus, OH 43216-1218

Re: Insured: [REDACTED]
Claim No.: APV000189031
Date of Loss: January 16, 2004
Our File No.: 12216510
VIN: 1B7HC16Z5YS [REDACTED]

Dear [REDACTED]

This letter is in response to your subrogation letter dated April 13, 2004, regarding the above referenced claim number.

While DaimlerChrysler sincerely regrets [REDACTED] loss in this incident, without proof of a manufacturing defect we are unable to accept this subrogation. [REDACTED] vehicle was not involved in any recall involving the hood latch, and DaimlerChrysler will require proof of a hood latch failure. If you are in possession of any documentation that shows that this hood latch was defective or failed, please forward a copy to my attention at your earliest convenience.

Sincerely,

M. R. Porterfield
Special Investigations
(248) 944-7134

MRP/mtr



07/06/2004

Docket Number: A080-03087-04-00

ARBITRATION FORUMS, INC.

HEARING NOTICE

Date Filed: 06/07/2004

Case Information

Party	Subsidiary	Representative	File Number	Insured Name	File Rec Answer
APP	GRANGE INDEMNITY INSURANCE COMP PO BOX 1218 COLUMBUS, OH 43216-1218	LINDA WILHELM (614)445-2519	APV189031	[REDACTED]	Yes N/A
Rsp 01	DAIMLER CHRYSLER P.O. BOX 21-8004 AUBURN HILLS, MI 48321-8004	M R PORTERFIELD () -	12216510	DAIMLER CHRYSLER	No No

Date of Loss/Accident: 01/16/2004

Company Claim Amount: \$2,156.55

Place of Loss/Accident: LODI, OH

Insured Deductible Int.: \$250.00

Hearing Information

Hearing Date: 08/03/2004

Reason for Hearing: SCHEDULED HEARING

Hearing Time: 8:30 am

Hearing Location: MOTORIST INSURANCE
471 E BROAD STREET
COLUMBUS, OH 43215

RECEIVED

JUL 13 2004

SPECIAL INVESTIGATIONS

All documentation MUST BE RECEIVED by: Jul 28, 2004 (ref. Rule 3-4) at the following address:

Arbitration Forums, Inc.
Atlanta Data Center
PO BOX 105517
Atlanta, GA 30348-5517
(888)272-9338

Send Overnight/Certified/Certified Return Receipt Mail ONLY to:

Arbitration Forums, Inc.
Atlanta Data Center
50 Glenlake Parkway
Suite 650
Atlanta, GA 30328-3473

Please Note: AF will only accept faxes for: applications, responses, contention sheets, notice of personal representation, deferment requests, deferment challenges and withdrawal notices. Please refer to the appropriate rule for time frames. AF will not accept evidentiary material via fax. Documents faxed to AF must also be faxed to the adverse party(ies).

Announcement

BE RECOGNIZED BY YOUR COMPANY AND PEERS AS A LEADER IN THE INSURANCE INDUSTRY! BECOME A CERTIFIED SPECIAL ARBITRATOR! AF HAS DESIGNED AN ARBITRATOR CERTIFICATION PROCESS FOR THE SPECIAL ARBITRATION PROGRAM. FOR MORE INFORMATION, VISIT OUR WEB SITE AT WWW.ARBFILE.ORG.

Arbitration Forums, Inc.,
Atlanta Data Center
PO BOX 105517
Atlanta, GA 30348-5517

CERTIFICATE #: 000030

TO: DAIMLER CHRYSLER
P.O. BOX 21-8004
AUBURN HILLS, MI 48321-8004

CERTIFICATE OF MAILING

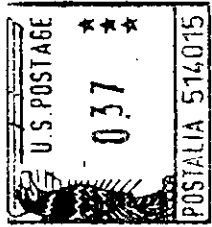
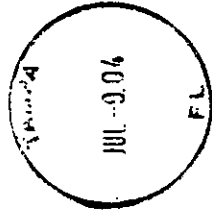
Date Printed: 07/06/2004

** BULLETIN **

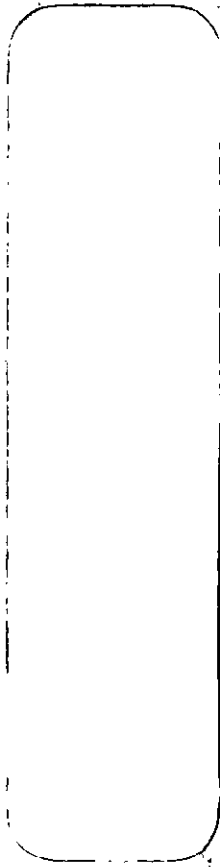
1 BE RECOGNIZED BY YOUR COMPANY AND PEERS AS A LEADER IN THE INSURANCE
INDUSTRY! BECOME A CERTIFIED
SPECIAL ARBITRATOR!

ARBITRATION FORUMS, INC. HAS DESIGNED AN ARBITRATOR CERTIFICATION
PROCESS FOR THE SPECIAL ARBITRATION
PROGRAM. TAKE THE INITIATIVE AND BECOME CERTIFIED NOW. FOR MORE
INFORMATION, CLICK ON THE SPECIAL
ARBITRATION CERTIFICATION SECTION ON OUR WEB SITE AT
WWW.ARBFILE.ORG.

AFATM
Arbitration Forums, Inc.
Atlanta Data Center
PO Box 105517
Atlanta GA 30348-5517



HEARING NOTICE/DECISION





April 13, 2004

DaimlerChrysler Corporation
Attn: Special Investigations
PO Box 218004
Auburn Hills, MI 48321-8004

RE: Claim Number: APV000189031
Insured: [REDACTED]
Date of Loss: 01/06/2004
Your File Number: 12216510
Amount of Loss: \$2,596.65

RECEIVED

APR 16 2004

SPECIAL INVESTIGATIONS

Dear DaimlerChrysler Corporation:

I am looking to you for reimbursement of **\$2,596.65**. Enclosed for your review is the file documentation concerning our settlement with our insured.

If liability is denied, I will require a detailed explanation supporting your position.

Grange Insurance has made payment as follows:

\$250.00	Insured's Deductible Loss
\$190.10	Rental Reimbursement
\$2,156.55	Comprehensive
\$2,596.65	Net Claim Including Deductible

If you have any questions, feel free to contact me.

Sincerely,

Rob Shaffer
Subrogation Examiner
shafferr@grangeinsurance.com
800-422-0550 ext. 2636
614-445-2636
Fax # 614-445-2535

Enclosures

**Grange Mutual Casualty Co., Grange Life Insurance Co., Grange Indemnity Insurance Co.,
Grange Insurance Co. of Michigan, Trustgard Insurance Co., Integrity Mutual Insurance Co., The Grange Bank**
650 South Front Street, P.O. Box 1218, Columbus, OH 43216-1218 614/445-2900 or 1-800-422-0550
www.grangeinsurance.com

Payment Details

Unit	Name (Role)	Reserve	Payment Type	Outsid Res	Payment	Closure	S
001, 2000 DODG RAM	Shellenbarger	NSACMP LOS	Pymt Taxbl Pay	\$0.00	\$2,156.55	CLOSE	

ITEM	VALUE
Check Status	CLEARED
Check Status Date	03/26/2004
In Payment Of	HLR 020404 483
Issued By	Steven Pierce (AKRON)

Pay to the Order of [REDACTED] No 0701716020
 \$ 2,156.55

Address [REDACTED]
 BURBANK OH 4
 USA

Signature *John Hancock*



01/20/2004 AT 08:27 AM

CLAIM SUMMARY

APV-189031-01

ADJUSTER: STEVEN PIERCE,
APPRAISER: KATHIE STOLL,

CLAIM #: APV-189031-01
POLICY #: [REDACTED]

INSURED: [REDACTED]
OWNER: [REDACTED]
ADDRESS: [REDACTED]

LOSS TYPE: COMPREHENSIVE
EVENING: (330) 948-8862
EVENING:

LODI, OH

VEHICLE: 2000 DODG BR1500 4X2 8-5.9L-FI 2D SHORT
VIN: 187HC16Z5YS571568 ODOMETER: 59034 COLOR: GREEN LICENS [REDACTED] OH
DRIVEABLE: YES PRIMARY IMPACT POINT: 12. FRONT



PLACE OF INSPECTION:
NORRIS COLL CTR LODI
8401 ORRIN DR
BUREBANK, OH 44214

ESTIMATE TO REPAIR		TOTAL LOSS VALUATION	
ESTIMATE	\$ 2,259.85	VEHICLE VALUATION	\$ 0.00
PRE-TAX SUBTOTAL	\$ 2,259.85	PRE-TAX SUBTOTAL	\$ 0.00
TAX	146.70	TAX	0.00
AFTER-TAX SUBTOTAL	\$ 2,406.55	AFTER-TAX SUBTOTAL	\$ 0.00
BETTERMENT	0.00		
DEDUCTIBLE	250.00	DEDUCTIBLE	250.00
APPEARANCE ALLOWANCE	0.00		
0% NEGLIGENCE	0.00	0% NEGLIGENCE	0.00
CALCULATED NET LOSS	\$ 2,156.55	CALCULATED NET LOSS	\$ -250.00
LKQ PARTS NOT INCLUDED		VALUATION REQUEST #	
QUAL REPL PARTS NOT INCLUDED			

SETTLEMENT
SETTLEMENT TYPE: REPAIRABLE
NEGOTIATED SETTLEMENT: \$2,156.55 ON WITH
SETTLEMENT OUTSTANDING: \$2,156.55

COMMENTS
1-INTERIOR-SOILED
2-TIRES-WILD COUNTRY TOURING SUV P255/70R16 LIGHT WEAR
3-PAINT-GOOD
4-BODY-DENTS ALONG TOP EDGE OF BED
COND 1

NO WREXPART-HOOD LATCH DEFECTIVE & HOOD FLEW UP-BROKE WINDSHIELD & DAMAGED
HOOD/GRILL

01/20/2004 AT 08:27 AM
17368

APV-189031-01

GRANGE INSURANCE COMPANIES
AKRON
THE CERTIFIED ESTIMATE
P.O. BOX 679
GREEN, OH 44203-0679
(800)686-6754X242 FAX: (800)686-9794

ESTIMATE OF RECORD

WRITTEN BY: KATHIE STOLL 01/20/2004 08:27 AM
ADJUSTER: STEVEN P

INSURED: [REDACTED] CLAIM #APV-189031-01
OWNER: [REDACTED] POLICY [REDACTED]
ADDRESS: [REDACTED] DATE OF LOSS: 01/06/2004 AT 12:00 AM
EVENING: [REDACTED] TYPE OF LOSS: COMPREHENSIVE
POINT OF IMPACT: 12. FRONT

INSPECT NORRIS COLL CTR LODI
LOCATION: 8401 ORRIN DR
BURBANK, OH 44214

REPAIR_SHOP

REPAIR NORRIS COLL CTR LODI
FACILITY: 8401 ORRIN DR
BURBANK, OH 44214

DAYS TO REPAIR
LICENSE #

2000 DODG BR1500 4X2 8-5.9L-FI 2D SHORT GREEN
VIN: 187HC16Z5YS571568 LIC: CJG1684 OH PROD DATE: ODOMETER: 59034
AIR CONDITIONING TILT WHEEL CRUISE CONTROL
INTERMITTENT WIPERS DUAL MIRRORS CLEAR COAT PAINT
POWER STEERING POWER BRAKES POWER WINDOWS
POWER LOCKS AM RADIO FM RADIO
STEREO CASSETTE SEARCH/SEEK
ANTI-LOCK BRAKES (2) DRIVER AIR BAG PASSENGER AIR BAG
CLOTH SEATS SPLIT BENCH SEATS REAR STEP BUMPER
SLIDING REAR WINDOW BEDLINER AUTOMATIC TRANSMISSION
OVERDRIVE ALUMINUM/ALLOY WHEELS

NO.	OP.	DESCRIPTION	QTY	EXT.	PRICE	LABOR	PAINT
1		HOOD & GRILLE					
2	REPL	HOOD FROM 12-6-93	1	632.00		1.5	3.2
3		ADD FOR CLEAR COAT					1.3
4		ADD FOR UNDERSIDE (COMPLETE)					1.6
5	REPL	HANDLE W/ROD W/O SPORTS PACKAGE	1	10.00			
6	REPL	SAFETY CATCH	1	6.90		INCL.	
7	REPL	GUIDE	1	4.00			
8	REPL	SKID PLATE	1	2.35			
9	REPL	RT HINGE FROM 10-20-97	1	76.50		0.3	0.3
10	REPL	LT HINGE FROM 10-20-97	1	76.50		0.3	0.3
11	REPL	RT DECAL SPORT BLUE	1	40.75		0.3	
12	REPL	LT DECAL SPORT BLUE	1	40.75		0.3	

01/20/2004 AT 08:27 AM
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APV-189031-01

ESTIMATE OF RECORD
2000 DODG BR1500 4X2 8-5.9L-FI 2D SHORT GREEN

NO.	OP.	DESCRIPTION	QTY	EXT.	PRICE	LABOR	PAINT
13	REPL	GRILLE ALL GREEN	1	497.00		INCL.	
14	REPL	FRAME	1	57.20		INCL.	
15		WINDSHIELD					
16*	SUBL	LT BLADE ASSY	1	220.00*	T		
17	REPL	RT BLADE ASSY	1	18.95		0.2	
18	REPL	LT BLADE ASSY	1	18.95		0.2	
19#		TINT	1				0.5
20#		COVER VEHICLE	1	5.00	T	0.2	
21#		CORROSION PROTECTION	1				0.5
22		OTHER CHARGES					
23#		E.P.C.	1	3.00			
SUBTOTALS ==>				1709.85		3.3	7.7

ESTIMATE NOTES:

RAN RPS-CALLED TRIPLETT-MIKE Q#551156. CALLED KEYSTONE-MARTY-NO MQVP PARTS.

NOTE-HOOD LATCH WAS WHAT CAUSED DAMAGES-PER INS MANUFACTURER DEFECT THAT HAS BEEN COVER BY DEALER IN PAST??? SO PART NOT COVERED BY LOSS-ONLY RESULTING DAMAGES.

PARTS			1481.85
BODY LABOR	3.3 HRS	@ \$ 36.00/HR	118.80
PAINT LABOR	7.7 HRS	@ \$ 36.00/HR	277.20
PAINT SUPPLIES	7.7 HRS	@ \$ 20.00/HR	154.00
SUBLET/MISC.			225.00
OTHER CHARGES			3.00
SUBTOTAL			\$ 2259.85
SALES TAX	\$ 2256.85	@ 6.5000%	146.70
TOTAL COST OF REPAIRS			\$ 2406.55
ADJUSTMENTS:			
DEDUCTIBLE			250.00
TOTAL ADJUSTMENTS			\$ 250.00
NET COST OF REPAIRS			\$ 2156.55

SIGNATURE _____ DATE _____

01/20/2004 AT 08:27 AM
17368

APV-189031-01

ESTIMATE OF RECORD
2000 DODG BR1500 4X2 8-5.9L-FI 2D SHORT GREEN

ANY PERSON WHO, WITH INTENT TO DEFRAUD OR KNOWING THAT HE IS FACILITATING A FRAUD AGAINST AN INSURER, SUBMITS AN APPLICATION OR FILES A CLAIM CONTAINING A FALSE OR DECEPTIVE STATEMENT IS GUILTY OF INSURANCE FRAUD.

ESTIMATE BASED ON MOTOR CRASH ESTIMATING GUIDE. UNLESS OTHERWISE NOTED ALL ITEMS ARE DERIVED FROM THE GUIDE DR3TA94 DATABASE DATE 12/2003 AND THE PARTS SELECTED ARE OEM-PARTS MANUFACTURED BY THE VEHICLES ORIGINAL EQUIPMENT MANUFACTURER. ASTERISK (*) OR DOUBLE ASTERISK (**) INDICATES THAT THE PARTS AND/OR LABOR INFORMATION PROVIDED BY MOTOR MAY HAVE BEEN MODIFIED OR MAY HAVE COME FROM AN ALTERNATE DATA SOURCE. NON-ORIGINAL EQUIPMENT MANUFACTURER AFTERMARKET PARTS ARE DESCRIBED AS AM, QUAL REPL PARTS OR COMP REPL PARTS WHICH STANDS FOR COMPETITIVE REPLACEMENT PARTS. USED PARTS ARE DESCRIBED AS LKQ, QUAL RECY PARTS, RCY, OR USED. RECONDITIONED PARTS ARE DESCRIBED AS RECON. RECORDED PARTS ARE DESCRIBED AS RECORE. NAGS PART NUMBERS AND PRICES ARE PROVIDED FROM NATIONAL AUTO GLASS SPECIFICATIONS, INC. POUND SIGN (#) ITEMS INDICATE MANUAL ENTRIES.

PATHWAYS - A PRODUCT OF CCC INFORMATION SERVICES INC.

01/20/2004 AT 08:27 AM
17368

APV-189031-01

ESTIMATE OF RECORD
2000 DODG BR1500 4X2 8-5.9L-FI 2D SHORT GREEN

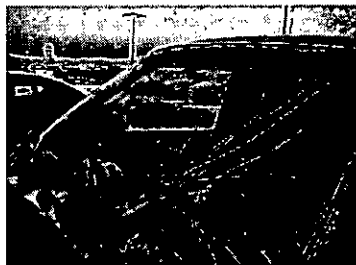
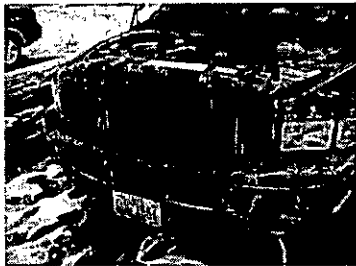
ALTERNATE PARTS USAGE

AFTERMARKET PARTS

AFTERMARKET SELECTION METHOD: AUTOMATICALLY LIST

NO. OF TIMES USER WAS NOTIFIED THAT AN AFTERMARKET PART WAS AVAILABLE: 3

NO. OF AFTERMARKET PARTS THAT APPEAR IN THE FINAL ESTIMATE: 0



Claim Reference Id APV-189031-01
File Name PHOTO3
File Date 01/19/2004
Label

Note Style:0, DODG, BR1500 4X2|
Insured:
LossDate:01/06/04|
ClaimNumber:APV-189031-01|
PolicyNumber:

Photo Location NORRIS COLL CTR LODI
Photo Taken By KATHIE STOLL
Estimate Indicator E01

Claim Reference Id APV-189031-01
File Name PHOTO4
File Date 01/19/2004
Label

Note Style:0, DODG, BR1500 4X2|
Insured:SHELLENBARGER, FRANK|
LossDate:01/06/04|
ClaimNumber:APV-189031-01|
PolicyNumber:

Photo Location NORRIS COLL CTR LODI
Photo Taken By KATHIE STOLL
Estimate Indicator E01

Claim Reference Id APV-189031-01
File Name PHOTO5
File Date 01/19/2004
Label

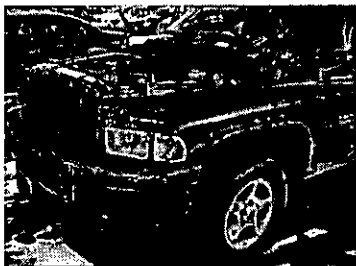
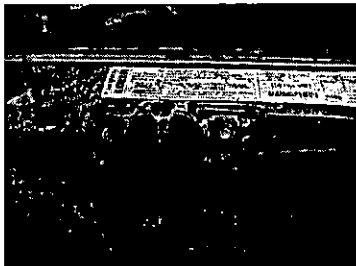
Note Style:0, DODG, BR1500 4X2|
Insured:
LossDate:01/06/04|
ClaimNumber:APV-189031-01|
PolicyNumber:NSA-9163206-12|

Photo Location NORRIS COLL CTR LODI
Photo Taken By KATHIE STOLL
Estimate Indicator E01

Claim Reference Id APV-189031-01
File Name PHOTO6
File Date 01/19/2004
Label

Note Style:0, DODG, BR1500 4X2|
Insured:
LossDate:01/06/04|
ClaimNumber:
PolicyNumber:NSA-9163206-12|

Photo Location NORRIS COLL CTR LODI
Photo Taken By KATHIE STOLL
Estimate Indicator E01



Claim Reference Id APV-189031-01
File Name PHOTO7
File Date 01/19/2004
Label

Note Style:0, DODG, BR1500 4X2|
Insured: [REDACTED]
LossDate:01/06/04|
ClaimNumber:APV-189031-01|
PolicyNumber: [REDACTED]

Photo Location NORRIS COLL CTR LODI
Photo Taken By KATHIE STOLL
Estimate Indicator E01

Claim Reference Id APV-189031-01
File Name PHOTO1
File Date 01/19/2004
Label

Note Style:0, DODG, BR1500 4X2|
Insured: [REDACTED]
LossDate:01/06/04|
ClaimNumber:APV-189031-01|
PolicyNumber: [REDACTED]

Photo Location NORRIS COLL CTR LODI
Photo Taken By KATHIE STOLL
Estimate Indicator E01

Claim Reference Id APV-189031-01
File Name PHOTO2
File Date 01/19/2004
Label

Note Style:0, DODG, BR1500 4X2|
Insured: [REDACTED]
LossDate:01/06/04|
ClaimNumber:APV-189031-01|
PolicyNumber: [REDACTED]

Photo Location NORRIS COLL CTR LODI
Photo Taken By KATHIE STOLL
Estimate Indicator E01

1999 Dodge Truck RAM 1500 1/2 Ton 4WD Pickup V8-360 5.9L VIN Z Magnum SFI LDC Copyright © 2003, ALldata 7.60

Page 1

Technical Service Bulletin # 973W

Date: 010401

Recall - Secondary Hood Latch Lubrication

April 2001

Interim Customer Notice Safety Recall No. 973W

Lubricate Secondary Hood Latch

Models

1994-1999 (BR/BE) Dodge Ram Pick-Up Truck

NOTE:

This recall applies only to the above trucks built at the:

- ^ Warren Assembly Plant ("S" in the 11th VIN position) built through May 7, 1999 (MDH 0507XX).
- ^ Saltillo Assembly Plant ("G" in the 11th VIN position) built through April 14, 1999 (MDH 0414XX).
- ^ Lago Alberto Assembly Plant ("M" in the 11th VIN position) built through April 21, 1999 (MDH 0421XX).
- ^ St. Louis North Assembly Plant ("J" in the 11th VIN position) built through May 10, 1999 (MDH 0814XX through 0510XX).

NOTE:

Only the above vehicles sold or currently registered in "Salt Belt" states (where large amounts of road salt are used for snow and ice removal) are involved.

(See "Owner Notification & Service Scheduling" section for a listing of salt belt states.)

IMPORTANT:

Some of the involved vehicles may be in dealer used vehicle inventory. Dealers should complete this service on these vehicles before retail delivery. Dealers should also lubricate the secondary hood latch on vehicles in for service. Involved vehicles can be determined by using the DIAL VIP System.

Subject

The secondary hood latch on about 793,000 of the above trucks may stick in the open position. This could allow the hood to open unexpectedly while driving if the primary (main) latch mechanism is not engaged.

DaimlerChrysler Corporation has notified the National Highway Traffic Safety Administration of its intent to conduct a safety recall to replace the secondary hood latch with a new secondary hood latch. The parts to implement this recall will not be available for many months. Customers have been sent an interim notice informing them of the future recall. The interim notice further requests that they ensure the primary hood latch is engaged and provides instructions to lubricate the secondary latch. Customers have been advised that they may have the secondary latch lubricated at dealerships. This notification provides the instructions for that lubrication.

Repair

DaimlerChrysler is working to obtain the parts to correct this condition as quickly as possible. However, it may take many months to complete the tooling, make and validate the parts and then deliver them to dealers. When the parts are available, another notification will be sent asking customers to bring their truck to their dealer to have this condition repaired.

In the interim, customers may schedule appointments to have the secondary hood latch lubricated. Combined with ensuring that the primary hood latch is engaged, lubrication will ensure that the hood remains latched during vehicle operation.

Parts Information

Part Number	Description
04318066	Mopar Spray White Lube (Lithium Grease)

NOTE:

There is enough lubricant in each can of spray white lube to lubricate approximately 20 secondary hood latches.

CLAIM #
APV-189031

1999 Dodge Truck RAM 1500 1/2 Ton 4WD Pickup V8-360 5.9L VIN Z Magnum SFI LDC
Page 2

Copyright © 2003, ALLDATA 7.60

DIAL System Functions 53 and VIP

All involved vehicles have been entered to DIAL System Functions 53 and VIP for dealer inquiry as needed.

Function 53 provides involved dealers with an updated VIN list of their vehicles. The customer name, address and phone number are listed if known. Vehicles that have been lubricated are removed from Function 53 within several days of repair claim submission. To use this system, type "53," at the "ENTER FUNCTION" prompt, then type "ORD973".

Completion Reporting and Reimbursement

Claims for vehicles that have been serviced must be submitted on the DIAL System.

Use the following labor operation number and time allowance:

	Labor Operation Number	Time Allowance
Lubricate the secondary hood latch	LU-BE-BR-8Z	0.2 hours

NOTE:

Normal shop supplies such as general-purpose lubricants (tube or sprays) are not reimbursable separately on warranty claims.

NOTE:

Because this is a precursor to a future recall, the claims should be handled in accordance with the recall claim processing instructions. See the Warranty Administration Manual, Recall Claim Processing Section, for complete instructions.

Service Procedure

Secondary Hood Latch Lubrication

1. With the engine OFF, open the hood.

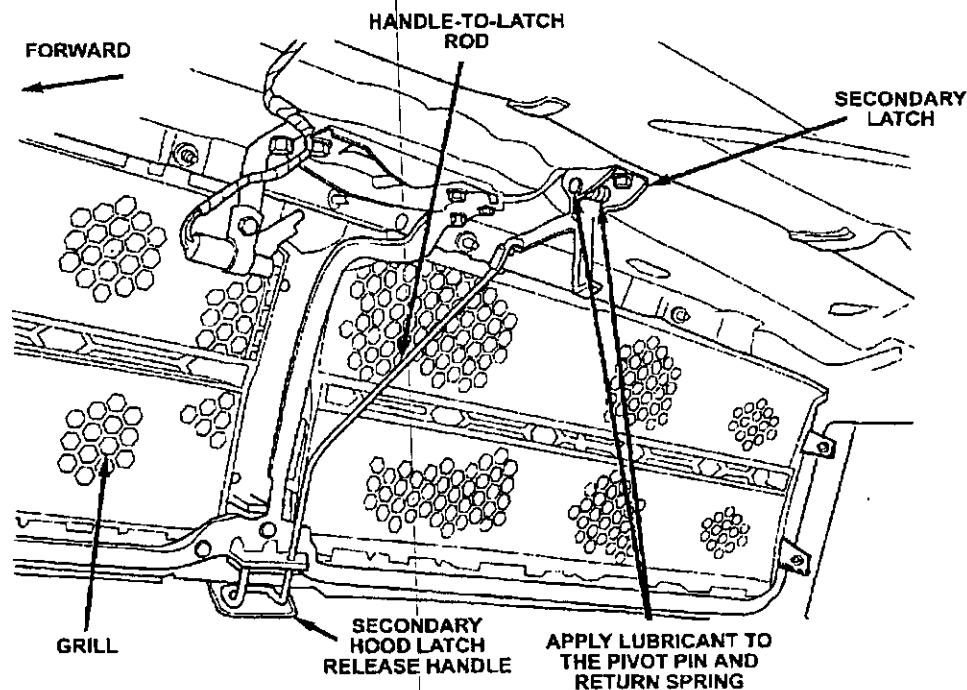


Figure 1 – Underhood View Shown

2. Using Mopar Spray White Lube (Lithium Grease) or equivalent, spray the secondary hood latch pivot pin and return spring (Figure 1).
3. Activate the secondary latch several times to ensure that the latch fully returns to the closed position and does not bind or stick.
4. Close the hood, making sure that the primary latch is engaged.

DAIMLERCHRYSLER

Dear Dodge Ram Pick-Up Truck Owner:

We are writing to inform you of a future safety recall on some 1994 through 1999 model year Ram pick-up trucks. These trucks have been operated for extended periods in geographic areas using large amounts of road salt for ice and snow removal. This safety action relates to a secondary latch that helps secure your vehicle's hood. There is also a primary latch, which is the principle mechanism holding the hood in place. Corrosion of the return spring on the secondary latch may cause the mechanism to bind in the "release position." If the primary latch is not engaged, and if the secondary latch binds, the hood could open unexpectedly.

This recall will include some 1994 and 1995 model year trucks that were involved in a prior safety recall involving the hood latch bracket. We have determined that those vehicles should be further repaired as part of this action.

We expect to send you another notification by the end of this year. At that time, we will ask you to take your vehicle to your dealer for installation of a replacement secondary latch.

During the interim, you can take some simple steps to ensure that your hood is secured. Your truck is equipped with both a primary and a secondary hood latch. If the primary hood latch is engaged, your hood will stay latched despite any corrosion to the secondary hood latch. To ensure the primary hood latch is engaged, open and close your hood strongly, then attempt to pull up on the hood. If the primary hood is engaged, the hood should not lift.

As a further measure, we ask that you lubricate the secondary hood latch in accordance with the instructions on the back of this letter. Lubrication will prevent the secondary hood latch from binding. If you prefer, you may make a service appointment with your dealer and your dealer will lubricate the secondary hood latch free of charge.

With these simple steps – ensuring that the primary latch is engaged and lubricating the secondary latch – your hood will stay secure. We will again notify you by letter when it is time to make an appointment with your dealer to have an improved secondary hood latch installed on your truck without charge.

We are sorry for any inconvenience this may cause you. If you have any further questions about this action, please call our Customer Assistance Center at 1-800-853-1403. A representative will assist you.

Customer Services Field Operations
DaimlerChrysler Corporation
973W

Secondary Hood Latch Lubrication:

1. With the engine OFF, release the primary hood latch by pulling the hood release lever located below the steering wheel, at the bottom of the instrument panel.
2. Reach into the opening under the center of the grille and push up on the secondary hood latch release handle and open the hood (Figure 1).
3. Using Mopar Spray White Lube (Lithium Grease) or equivalent, spray the secondary hood latch pivot pin and return spring (Figure 1).
4. Push up on the secondary latch release handle several times to ensure that the latch fully returns to the closed position and does not bind or stick. Apply additional lubricant as required until the secondary latch operates freely.
5. Close the hood. Pull up on the hood to make sure that the primary latch is engaged.

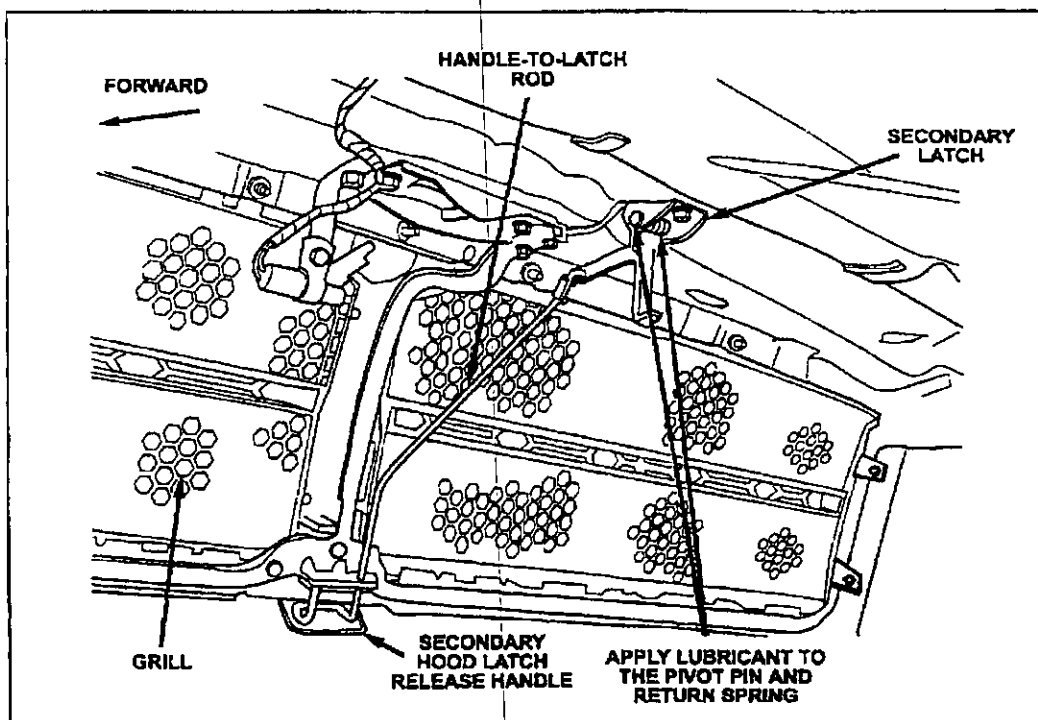


Figure 1 – Underhood View Shown

ACORD® AUTOMOBILE LOSS NOTICE

DATE (MM/DD/YY)
01/15/2004

PRODUCER Hunter Insurance Agency Inc 703 N Court St P O Box 446 Medina, OH 44258	PHONE (A/C, No, Ext): (330)725-4543	COMPANY Grange Indemnity	MISCELLANEOUS INFO (Site & location code)
CODE: 34152		SUB CODE: 06	EFFECTIVE DATE 09/19/2003
AGENCY CUSTOMER ID: 00000907		EXPIRATION DATE 03/19/2004	DATE OF ACCIDENT AND TIME 01/06/2004
PREVIOUSLY REPORTED YES NO		REFERENCE NUMBER	CAT #

INSURED NAME AND ADDRESS [REDACTED] LODI, OH	CONTACT NAME AND ADDRESS [REDACTED] LODI, OH	CONTACT INSURED	WHERE TO CONTACT
RE [REDACTED]	BUSINESS PHONE (A/C, No, Ext)	RES [REDACTED]	BUSINESS PHONE (A/C, No, Ext)
WHEN TO CONTACT			

LOSS LOCATION OF ACCIDENT (Include city & state)	AUTHORITY CONTACTED: REPORT #:	VIOLATIONS/CITATIONS
DESCRIPTION OF ACCIDENT (Use reverse side, if necessary) Hood suddenly flew up while insd was driving down the road.		

BODILY INJURY (Per Person) 100,000	BODILY INJURY (Per Accident) 300,000	PROPERTY DAMAGE 50,000	SINGLE LIMIT	MEDICAL PAYMENT 1,000	OTC DEDUCTIBLE 250	OTHER COVERAGE & DEDUCTIBLES (UM, no-fault, towing, etc) UMISP
LOSS PAYEE					COLLISION DED 250	

UMBRELLA/EXCESS	UMBRELLA	EXCESS	CARRIER:	LIMITS:	PER CLAIM	PER OCCUR
-----------------	----------	--------	----------	---------	-----------	-----------

INSURED VEHICLE VEH # 0001 YEAR 2000 MAKE: DODG MODEL: RAM	BODY TYPE: Pickup truck V.I.N.: 187HC16Z5YS [REDACTED]	PLATE NUMBER	STATE OH
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OWNER'S INSURED NAME & ADDRESS FRANK JR. (Check if same as owner)	DATE OF BIRTH	DRIVER'S LICENSE NUMBER	STATE	PURPOSE OF USE	USED WITH PERMISSION? YES NO
--	---------------	-------------------------	-------	----------------	---------------------------------

RELATION TO INSURED (Employee, family, etc.)	ESTIMATE AMOUNT 2,437	WHERE CAN VEHICLE BE SEEN? Norris Coll in Lodi	WHEN CAN VEH BE SEEN?	OTHER INSURANCE ON VEHICLE
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PROPERTY DAMAGED DESCRIBE PROPERTY NONE (If auto, year, make, model, plate #)	OTHER VEH/PROP INS? YES NO	COMPANY OR AGENCY NAME: POLICY #:
---	-------------------------------	--------------------------------------

OWNER'S NAME & ADDRESS APV 189031 DAR 1201	RESIDENCE PHONE (A/C, No, Ext):	BUSINESS PHONE (A/C, No, Ext):	RESIDENCE PHONE (A/C, No, Ext):	BUSINESS PHONE (A/C, No, Ext):
---	---------------------------------	--------------------------------	---------------------------------	--------------------------------

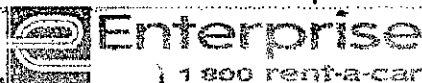
OTHER DRIVER'S NAME & ADDRESS (Check if same as owner)	ESTIMATE AMOUNT	WHERE CAN DAMAGE BE SEEN?
---	-----------------	---------------------------

INJURED NAME & ADDRESS	PHONE (A/C, No)	INS/OTH VEH/VEH	AGE	EXTENT OF INJURY
---------------------------	-----------------	-----------------	-----	------------------

WITNESSES OR PASSENGERS NAME & ADDRESS	PHONE (A/C, No)	INS/OTH VEH/VEH	OTHER (Specify)
---	-----------------	-----------------	-----------------

REMARKS (Include adjuster assigned) Insd learned that Dodge has a problem with this and asked dealer to take care of the damage. Dodge rep suggested to turn in and let comp subrogate.

REPORTED BY Frank Jr	REPORTED TO Dan / T Wires	SIGNATURE OF PRODUCER OR INSURED Daniel Hunter
-------------------------	------------------------------	---



1 800 rent-a-car

 OWNER OF VEHICLE: CLERAC, INC.
 BRANCH ADDRESS: 3112 E. 12th Ave.

Jonathan

[Signature]

RENTAL TYPE		RENTAL AGREEMENT NO. D	
RENTER			
ORIGINAL VEHICLE			
COLOR	LICENSE NO.		
MODEL	YEAR		
MILEAGE	IN	BILL TO	CONTRACT
AGE	OUT	DATE	EXT
CONDITION X	RENTER	OUT	IN
P.F. DR/FDR			
P.F. DR/QTR			
D.F. DR/FDR			
D.F. DR/QTR			
FRONT BUMPER			
REAR BUMPER			
ROOF			
HOOD/GLASS			
TRUNK/SPARE			
WHL COVERS			

OPTIONAL PRODUCTS

NOTICE: Our contract offers, for an additional charge, optional products including Damage Waiver, Personal Accident Insurance, and Supplemental Liability Protection. Before deciding whether to purchase any of these optional products, you may wish to determine whether your personal insurance or credit card provides you coverage during the Rental Period. The purchase of any of these optional products is not required to rent a Vehicle.

RENTER DECLINES OPTIONAL DAMAGE WAIVER (AND ASSUMES DAMAGE RESPONSIBILITY)	RENTER ACCEPTS OPTIONAL DAMAGE WAIVER (AND ASSUMES DAMAGE RESPONSIBILITY)	RENTER:
RENTER DECLINES OPTIONAL PERSONAL ACCIDENT INSURANCE (PAI)	RENTER ACCEPTS OPTIONAL PERSONAL ACCIDENT INSURANCE (PAI)	RENTER:
RENTER DECLINES OPTIONAL SUPPLEMENTAL LIABILITY PROTECTION (SLP)	RENTER ACCEPTS OPTIONAL SUPPLEMENTAL LIABILITY PROTECTION (SLP)	RENTER:

ACKNOWLEDGMENT OF THE ENTIRE AGREEMENT

I HAVE READ AND AGREE TO THE TERMS AND CONDITIONS OF THE RENTAL CONTRACT, WHICH CONSISTS OF PAGES 1 THROUGH 4. I HAVE READ AND AGREE TO THE TERMS AND CONDITIONS OF THE RENTAL CONTRACT, WHICH CONSISTS OF PAGES 1 THROUGH 4. I HAVE READ AND AGREE TO THE TERMS AND CONDITIONS OF THE RENTAL CONTRACT, WHICH CONSISTS OF PAGES 1 THROUGH 4.

REPLACEMENT VEHICLE

COLOR	LICENSE NO.	DATE	TIME	AMOUNT	PAID BY	DATE PAID
MODEL	YEAR					
MILEAGE	IN	OUT				
AGE	OUT					
CONDITION X	RENTER	OUT	IN	ADDITIONAL INFORMATION		
P.F. DR/FDR						
P.F. DR/QTR						
D.F. DR/FDR						
D.F. DR/QTR						
FRONT BUMPER						
REAR BUMPER						
ROOF						
HOOD/GLASS						
TRUNK/SPARE						
WHL COVERS						

6011 0050 8070 8681
 DROPPED VEHICLES - If Renter returns vehicle during nonbusiness hours or to any other place than the original rental branch, Renter is responsible for any and all damages and/or rental charges until an employee of Owner checks in the vehicle.

TOTAL CHARGES	190.16
DEPOSITS	
REFUNDS	
AMOUNT DUE	0
CLOSED BY	[Signature]
PAID BY	Cash
RECEIPT OF	Date
CASH REFUND	Amount
RECEIVED BY	Received by

Claim No. _____

OS-9-31B

189031

BUSINESS REPLY MAIL

FIRST-CLASS MAIL

PERMIT NO. 1833

COLUMBUS, OHIO

POSTAGE WILL BE PAID BY ADDRESSEE

ATTENTION SUBROGATION DEPT

GRANGE INSURANCE COMPANIES

P O BOX 1218

COLUMBUS OH 43272-4018

NO POSTAGE
NECESSARY
IF MAILED IN THE
UNITED STATES



FIRST CLASS

FIRST CLASS

FIRST CLASS

FIRST CLASS



660 S. Front St. • P.O. Box 1218
Columbus, Ohio 43216-1218

RETURN SERVICE REQUESTED

FIRST CLASS MAIL

DaimlerChrysler Corporation

Attn: Special Investigations

PO Box 218004

Auburn Hills, MI 48321-8004

OE: File # 12216510

OH
METER U.S. POSTAGE
71429931



ARBITRATION FORUMS, INC.

Auto-Form

This is a BINDING arbitration. Nonmembers answering are bound by this decision.

- ☐ Check if Amendment (Highlight Amended Area)
☐ Check if Counterclaim (Rule 3-8)

☒ Filed at Atlanta Data Center
 Phone: 1-888-272-9338
☐ Filed at Denver Data Center
 Phone: 1-888-272-8096

I. APPLICANT INFORMATION and ALLEGATIONS (Rule 3-2, 3-3)

Company Code **14-3** Billing Code
 Company/Subsidiary Name **Grange Indemnity Insurance Co.**
 Representative **Linda Wilhelm**
 Rep. Address **P.O. Box 1218**
Columbus, OH 43216

Telephone Number **(614) 445-2519** ext.
 Fax Number **(614) 445-2535**
 E-Mail Address **wilhelml@grangeinsurance.com**
 Insured Name [REDACTED]
 File Number **APV-189031**
 Date of Loss **01/16/2004**
 City **Lodi,** State **OH**
 LOCATION OF ACCIDENT

Company Claim Amount **\$2,156.55**
 Insured Deductible **\$250.00**

- ☐ Yes ☒ No I request One Year Deferment (Rule 3-10).
☒ Yes ☐ No I request Notice of Hearing (Rule 4-3, 3-15).
☐ Yes ☒ No This file will be represented in person (Rule 4-9).
Attach Contentions Sheet (Rule 3-2)

Administrative Requests
CERTIFICATION OF SERVICE: The Applicant certifies that requirements of Rule 3-2, 3-3, and condition precedent have been fulfilled.

Signature

06/02/04
 Date

II. RESPONDENT INFORMATION and ALLEGATIONS (Rule 3-4, 3-5)

RESPONDENT #1
 Subsidiary Name **Daimler Chrysler**
 Rep. Name **M.R. Porterfield**
 Rep. Address **P.O. Box 21-8004**
Auburn Hills, MI 48324-8004
 File # **12216510**
 Insured **Daimler Chrysler**

RECEIVED

JUN 08 2004

SPECIAL INVESTIGATIONS

RESPONDENT #2
 Subsidiary Name
 Rep. Name
 Rep. Address

File #
 Insured

RESPONDENT #3
 Subsidiary Name
 Rep. Name
 Rep. Address

File #
 Insured

Reminder: If you have first-party auto damages, please file your Counter-Application (on separate application) along with this response (Rule 3-8).

- ☐ Yes ☐ No Do you admit coverage?

RESPONDENT # and COMPANY CODE

(A failure to answer or an answer of 'yes' will be deemed a waiver of ANY coverage defense (Rule 3-5(b)). A 'no' must be explained on Contentions Sheet.)

- ☐ Yes ☐ No I admit liability (Rule 3-5(c)).
 Itemize damages contested on Contentions Sheet (Rule 3-5(f)).
☐ Yes ☐ No I request One Year Deferment (Rule 3-10).
☐ Yes ☐ No I request Notice of Hearing (Rule 4-3).
☐ Yes ☐ No This file will be represented in person (Rule 4-9).

Attach Contentions Sheet
 Administrative Requests
 Liability Deductible
 Commercial Deductible/Retention (Rule 6-3).

CERTIFICATION OF SERVICE: The Respondent certifies that requirements of Rule 3-4, 3-5, and condition precedent have been fulfilled.

Signature
 Telephone Number: () ext.
 Fax Number ()
 E-Mail Address

Date



ARBITRATION FORUMS, INC.

Auto-Form

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 Representative **Linda Wilhelm**
 Rep. Address **P.O. Box 1218**
Columbus, OH 43216

Telephone Number **(614) 445-2519** ext.
 Fax Number **(614) 445-2535**
 E-Mail Address **wilhelml@grangeinsurance.com**
 Insured Name **[REDACTED]**
 File Number **APV-189031**
 Date of Loss **01/16/2004**
 City **Lodi,** State **OH**
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 Insured Deductible **\$250.00**

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Signature *Linda Wilhelm*

06/02/04
Date

II. RESPONDENT INFORMATION and ALLEGATIONS (Rule 3-4, 3-5)

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Subsidiary Name **Daimler Chrysler**
 Rep. Name **M.R. Porterfield**
 Rep. Address **P.O. Box 21-8004**
Auburn Hills, MI 48324-8004
 File # **12216510**
 Insured **Daimler Chrysler**

RESPONDENT #2

Subsidiary Name
 Rep. Name
 Rep. Address

File #
 Insured

RESPONDENT #3

Subsidiary Name
 Rep. Name
 Rep. Address

File #
 Insured

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RESPONDENT # and COMPANY CODE

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Administrative Requests

Liability Deductible

Commercial Deductible/Retention (Rule 6-3).

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Signature

Date

Telephone Number () ext.

Fax Number ()

E-Mail Address



ARBITRATION FORUMS, INC.

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Administrative Requests

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Signature [Signature] Date **06/02/04**

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RESPONDENT #1

Subsidiary Name **Daimler Chrysler**
 Rep. Name **M.R. Porterfield**
 Rep. Address **P.O. Box 21-8004**
Auburn Hills, MI 48324-8004
 File # **12216510**
 Insured **Daimler Chrysler**

RESPONDENT #2

Subsidiary Name
 Rep. Name
 Rep. Address

File #
 Insured

RESPONDENT #3

Subsidiary Name
 Rep. Name
 Rep. Address

File #
 Insured

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RESPONDENT # and COMPANY CODE

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 Liability Deductible
 Commercial Deductible/Retention (Rule 6-3).

CERTIFICATION OF SERVICE: The Respondent certifies that requirements of Rule 3-4, 3-5, and condition precedent have been fulfilled.

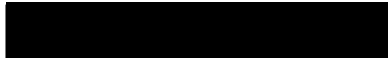
Signature _____ Date _____
 Telephone Number () ext. _____
 Fax Number () _____
 E-Mail Address _____

**ARBITRATION FORUMS, INC.
CONTENTION SHEET**

This file is provided by: **Applicant**

Company: Grange Indemnity Insurance Co.

Insured:




File #: APV-189031

AFFIRMATIVE DEFENSES:

☐ Check if Affirmative Defense - If checked list defenses:

CONTENTIONS:

This loss is a result of a secondary hood latch failure on the Applicant insured's 2000 Dodge Ram – VIN #: 1B7HC16Z5YS 

The Applicant was traveling down the road when unexpectedly the hood on his vehicle flew up damaging the hood and windshield. After inspection it was found the secondary latch failed, releasing the hood. Upon investigation into this matter it was discovered that the Applicant insured's vehicle was under a safety recall for the Secondary Hook Latch.

The vehicles recalled were located in the "Salt Belt" states, which includes Ohio. The recall was for vehicles manufactured in 1994 through 1999. Even though the Applicant vehicle is listed as a 2000 Dodge Ram, provided is proof through the VIN # that this vehicle was manufactured in 1999, and was shipped for sale September 1999.

Also provided is a list of the models that are recalled in accordance with VIN #s for the safety repair. Please note that the trucks built at the Warren Assembly Plant with "S" in the 11th VIN position was recalled. This VIN position matched the Applicant's vehicle.

Provided are photographs establishing the failure of the secondary hood latch. The Applicant has provided proof that the Applicant vehicle was under a safety recall, and that the direct cause of the resulting damages to the Dodge Ram from the secondary hood latch.

The Applicant requests a favorable decision to recover for damages to the 2000 Dodge Ram.

EVIDENCE:

1. Several (4) letters, bulletins and/or notices on the recall by the Respondent company
2. Proof of ownership and shipping information
3. Photographs
4. Check copy and bill of repair

ITEMIZATION OF DAMAGES:

\$2,156.55 Applicant's interest for damages
+ 250.00 for Applicant insured's deductible interest

OTHER REMARKS:

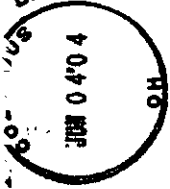
Grange
INSURANCE

650 S. Front St. • P.O. Box 1218
Columbus, Ohio 43216-1218

TEMP-RETURN SERVICE REQUESTED

Daimler-Chrysler
P.O. Box 21-8004
Auburn Hills, MI 48324-8004

PRESORTED
FIRST CLASS



0293

U.S. POSTAGE

ECFYAME 48321