REIMBURSEMENT PLAN

Requirements for Reimbursement

If you meet all of the following requirements, you are eligible to receive reimbursement under this plan:

- 1. You own or have owned a 2010-2012 Mazda6 built between September 14, 2009 and May 2, 2011.
- 2. You have paid for fuel tank inspection, repair or replacement due to damage/crack, prior to launch of this campaign.
- 3. You have an original or legible copy of the paid repair order or invoice receipt showing:
 - Vehicle model and year, and vehicle identification number (VIN)
 - Your name and address at the time of repair
 - Description of the concern reported
 - Inspection, repair or replacement of the fuel tank due to damage/crack in the tank
- 4. Mail this reimbursement application form with the applicable payment receipts in the enclosed envelope to:

Mazda North American Operations Attn: Recall Reimbursement Dept P.O. Box 57085 Irvine, CA 92619-7085

Procedure for Reimbursement Request

If your vehicle has had the fuel tank inspected, repaired or replaced due to damage/crack in the tank <u>prior to the launch</u> of this campaign, you may apply for reimbursement by doing the following:

- 1. Complete the Reimbursement Application Form found on the reverse side of this page.
- 2. Mail the Reimbursement Application Form with a <u>legible</u> copy of the paid repair order and/or invoice using the enclosed envelope. Include any applicable payment receipts, i.e. credit card receipt, cancelled check, etc.
- 3. Retain copies of the paid repair order or invoice and this application form for your records.
- 4. You will be reimbursed for the amount you have paid for the inspection, repair or replacement of the fuel tank due to damage/crack in the tank.

If you wish to correspond with Mazda regarding this reimbursement plan, please write to the above address and refer to your vehicle identification number (VIN).

Any reimbursement application form that is incomplete, illegible, or sent without the legible copy of the paid repair order or invoice will be returned for completion. If Mazda has any questions concerning your application for reimbursement, you may be contacted. Please allow 6-8 weeks for processing.

REIMBURSEMENT APPLICATION FORM

2010-2012 Mazda6 Fuel Tank Safety and Emission Recall 7214C

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Address:					
7.000.	Street Address				
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	City	State	<u> </u>	Zip Code	
	Home:				
Phone N	umber: Work:				
	Work.				
Vehicle lo	dentification Number (V	IN):			
	(17 digits in length)				
Total Am	Total Amount of Reimbursement Requested:				
			Dollars	Cents	
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INSTRUCTIONS FOR GENERAL RELEASE DESCRIBED BELOW:					
	•	Please read thorough Fill in vehicle identifice	•	per	
	•	Sign the General Re	ease (belov	N)	
		General Re	ease		
Lam submitting to Ma	zda Motor Corporatio			ment for all inspection, repair or	
		date. The vehicle iden			
VI	N:				
all claims for such ir North American Ope	nspection/repair cos erations, its regions/ ctors, officers, agen	sts. This release shall /distributors (foreign its, employees, divisi	benefit Ma and domes	, its agents, and its related ent azda and its authorized agent stic), its authorized dealership diaries, and affiliated compan	Mazda os, and all
Dated	:	Signed:			