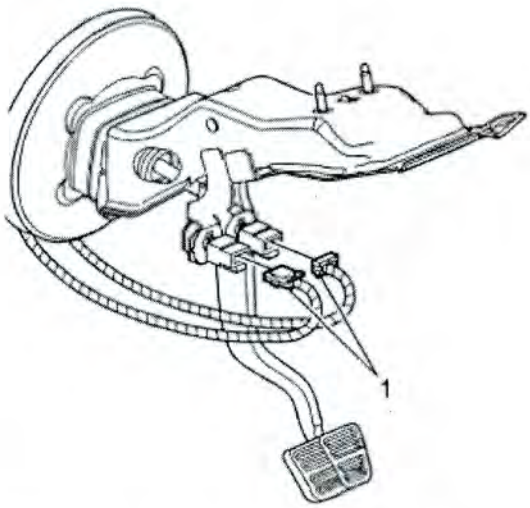

d. Connect the stop lamp switch electrical connectors (1).

e. Check the switch for proper operation.

CUSTOMER REIMBURSEMENT – For US

All customer requests for reimbursement of previously paid repairs for the special policy condition will be handled by the Owner Relatior Center, not by service facilities.
A Reimbursement Procedure and Claim Form are included with the customer letter.

CUSTOMER REIMBURSEMENT – Puerto Rico and the U.S. Virgin Islands

Customer requests for reimbursement of previously paid repairs for the special policy condition are to be submitted to the dealer or distributor.
When a customer requests reimbursement, they must provide the following:

- Proof of ownership at time of repair.
- Original paid receipt confirming the amount of repair expense(s) that were not reimbursed, a description of the repair, and the person or entity performing the repair.

Claims for customer reimbursement on previously paid repairs are to be submitted as required by ICS.

IMPORTANT: Refer to the Isuzu Service Policies and Procedures Manual for specific procedures regarding customer reimbursement.

CLAIM INFORMATION

1. Submit a claim using the table below.

Labor Code	Description	Labor Time	Net Item
09T5788	Replace Brake Lamp Switch	0.2	N/A
09T5789	Customer Reimbursement – Puerto Rico/U.S. Virgin Islands only	0.0	*

• The amount identified in the "Net Item" column should represent the dollar amount reimbursed to the customer. "Net Item" amounts should be claimed as a Special Claim using sublet code "CR".

OWNER NOTIFICATION

Isuzu Motors America LLC will notify customers of this special policy on their vehicles (See copy of typical letter included with this bulleti

OWNER LETTER

Dear Isuzu Customer:

As the owner of a 2006-2008 model year Isuzu I-Series vehicle, your satisfaction with out product is very important to us.

This letter is intended to make you aware that some 2006-2008 model year Isuzu I-Series vehicles may have a condition where contamination in the brake lamp switch could cause the loss of brake lamps or continuous illumination of the brake lamps. The performance of the brakes is not affected. Also, if your vehicle is equipped with cruise control, it may become inoperative.

Do not take your vehicle to your Isuzu service facility as a result of this letter unless you believe that your vehicle has the condition as described above.

WHAT WE HAVE DONE

Isuzu Motors America, LLC is providing owners with additional protection for the brake lamp switch. If this condition occurs on your 200E 2008 Isuzu I-Series vehicles within 7 years of the date your vehicle was originally placed in service or 100,000 miles (160,000 km), whichever occurs first, the condition will be repaired for you at no charge. Diagnosis or repair for conditions other than the condition described above is not covered under this special policy.

WHAT YOU SHOULD DO

Repairs and adjustments qualifying under this special policy must be performed by an Isuzu service facility. If you believe your vehicle h the condition described above, you may want to contact your Isuzu service facility to find out how long they will need to have your vehicl so that you may schedule the appointment at a time that is convenient for you. This will also allow your dealer to order parts if they are r already in stock. Keep this letter with your other important glove box literature for future reference.

REIMBURSEMENT

The enclosed form explains what reimbursement is available and how to request reimbursement if you have previously paid for repairs f the special policy condition.

To locate the nearest Isuzu service facility, visit our website at www.isuzu.com and click on the service facility locator icon and enter you zip code or state. Should you not have access to a computer terminal please contact our National Owner Relations Department at the number listed below.

Isuzu Owner Relations
Isuzu Motors America, LLC
1400 South Douglass Road Suite 100
Anaheim, CA 92806
1-800-255-6727

We regret any inconvenience this action may cause you; however, we have taken this action in the interest of your safety and continued satisfaction with our products.

Sincerely, Isuzu Motors America, LLC

CUSTOMER REIMBURSEMENT PROCEDURE

If you have paid to have this condition corrected prior to this notification, you may be eligible to receive reimbursement.

Requests for reimbursement may include parts, labor, fees and taxes. Reimbursement may be limited to the amount the repair would ha cost if completed by an authorized dealer.

Your claim will be acted upon within 60 days of receipt.

If your claim is:

- Approved, you will receive a check,
- Denied, you will receive a letter with the reason(s) for the denial, or
- Incomplete, you will receive a letter identifying the documentation that is needed to complete the claim and offered the opportunity to resubmit the claim when the missing documentation is available.

To file a claim for reimbursement, please follow the instructions on the Claim Form provided on the reverse side of this procedure. If you have any questions or need assistance, please contact Isuzu Owner Relations at 1-800-255-6727, or email at customerservice@isza.cc

CUSTOMER REIMBURSEMENT CLAIM FORM

This section to be completed by Claimant

Date Claim Submitted: _____

17-Digit Vehicle Identification Number (VIN): _____

Mileage at Time of Repair: _____ Date of Repair: _____

Claimant Name (please print): _____

Street Address or PO Box Number: _____

City: _____ State: _____ ZIP Code: _____

Daytime Telephone Number (include Area Code): _____

Evening Telephone Number (include Area Code): _____

Amount of Reimbursement Requested: $ _____

The following documentation must accompany this claim form.

Original or clear copy of all receipts, invoices, and/or repair orders that show:

- The name and address of the person who paid for the repair.
- The Vehicle Identification Number (VIN) of the vehicle that was repaired.
- What problem occurred, what repair was done, when it was done, and who did it.
- The total cost of the repair expense that is being claimed.
- Payment for the repair in question and the date of payment.
  (copy of front and back of cancelled check, or copy of credit card receipt)

My signature to this document attests that all attached documents are genuine and request reimbursement for the expense I incurred for the repair covered by this letter.

Claimant's Signature: _____

Please mail this claim form and the required documents to:

Isuzu Owner Relations
1400 S. Douglass Road, Suite 100
Anaheim, Ca. 92806

Reimbursement questions should be directed to the following number:
1 800 255-6727
Or E mail at customerservice@isza.com