

SUNROOF SETTLEMENT

DECLARATION OF ATTEMPT TO FIRST HAVE REPAIR PERFORMED BY AUDI DEALER AT NO CHARGE

Your Full Name and Address: _____

Settlement Class Vehicle Information:

Year _____ Model _____

Vehicle Identification Number (VIN, on your registration) _____

Date of Covered Repair for Which Reimbursement is Requested _____

Name and Address of Entity that Performed Said Repair _____

I hereby state the following, under penalty of perjury:

1. The repair referenced in my Claim Form was performed on my Settlement Class Vehicle by a service entity or facility that is not an authorized Audi dealer.
2. Prior to that repair, I first attempted to have the repair performed by an authorized Audi dealer, _____ [Dealer Name] on _____ [Date].
However, said dealer declined to perform the repair free of charge.
3. I have attempted in good faith to obtain copies of the documentation confirming that the above-referenced dealer declined to perform said repair free of charge; however, despite my attempt, I was not able to obtain the documentation. The following is a description of the good faith effort(s) I made to obtain the documentation, including the name(s) of the person(s) with whom I communicated, the date(s) and manner in which I contacted him/her/them, and what I was told regarding the unavailability of, or inability to obtain, copies of the records:

All of the information stated in this Declaration is true and correct to the best of my knowledge and belief, and this document is signed under penalty of perjury.

Date:

Signature of Primary Owner/Lessee

MM / DD / YYYY

Date:

Signature of Secondary Owner/Lessee (if applicable)

MM / DD / YYYY