Original sent 3/14/11

Kathy [redacted]
03/14/2011 12:30 PM

To
cc
bcc [redacted]
Subject Safety Recall 9LG Phase 3 Semi-Permanent Installation of Carpet Floor Mats - Request for Reimbursement

Attached is a worksheet to be completed and submitted to initiate a reimbursement request for 2008 through 2011 LX 570s where the carpeted floor mats were semi-permanently attached per the guidelines posted on TIS. Lexus will reimburse dealers one tenth of an hour (0.1) per vehicle at the warranty labor rate. All submissions should be made once per dealer no later than Friday, May 6, 2011.. Completed forms may be submitted to Lexus for processing via fax (310-381-4293) or e-mail (kathy_wachs@toyota.com). Credits will be issued via a miscellaneous "B" invoice credit and will reference the dealer reference provided on the form at the time of submission..

Please assure all required fields are legible and complete.

Thank you for your continuing support.

Safety Recall 9LG Phase 3 Zip Tie Reimbursement Request.doc

Kathy [redacted]
Vendor Relations Administrator, Sr.
Lexus Service & Parts Operations
Tel. 310.468.[redacted] Fax 310.381.[redacted]
http://tv/lexusps

Safety Recall 9LG Phase 3Zip Tie Reimbursement Request

To request reimbursement for implementing the zip tie interim procedure on 2008 to 2011 LX 570 vehicles subject to Safety Recall 9LG please complete this form and fax to 310-381-4293 or e-mail to kathy_wachs@toyota.com. All VINs requested for reimbursement must be submitted at one time and the request must be received by Lexus by Friday, May 6, 2011. Dealers will be reimbursed via a miscellaneous "B" invoice credit in May, 2011. Vehicles received by dealers in new vehicle inventory after March 1, 2011 are not eligible because the floor mats were tethered to the vehicle during port processing.

Dealer Code: _____

Dealer Contact (Name and Phone Number): _____

Signature of General Manager: _____

Signature of Service Manager: _____

Dealer Reference Number (this number will be on the credit invoice for your reference):

_____ Dealer Warranty Labor Rate: _____

17 Digit VIN	Repair Order Number	Date of Zip Tie Procedure