

TIRE SAFETY RECALL PROGRAM: NHTSA 22T003.

Instructions for Filing a Continental Tire the Americas, LLC (CTA) Continental Tire Canada (CTC) Reimbursement Request Form This form is to be used by any consumer who purchased tire(s) eligible for reimbursement under the CTA Tire Safety Recall Program NHTSA 22T003. The tire included in the CTA Tire Safety Recall Program is for: ContiScoot DOT: H6

To be eligible for reimbursement you must complete a Reimbursement Request Form and submit this form with the required documents not later than 180 days from receipt of the recall announcement letter.

- For Replacement tires:
 - A copy of the receipt showing the purchase of the recalled tire(s)
 - A copy of the receipt showing the purchase of a replacement tire(s)

Customer Information Plea	se print clearly File #		
Customer Name:			
Address:			
City:	State:	Zip code	
Daytime Phone (including are	ea code) ()		
Recall Tire Information			
Brand:			
Model _ Tire Line:		_	
Size			
Replacement Tire Informati	ion		
Name of Dealer where tires v	vere purchased		
Dealer street address			
City: State:		Zip code:	
Dealer Phone Number (include	ding area code) ()	Date of purchase	
Scooter tires installed on: Mo	odel Year Brand	Model _ Tire Line	
Amount Paid \$		al or copy) that identifies the replacemer mbursement will be based on submitted retail price of the tire.	
		ease allow 8 weeks for processing. d in this Request is true and accurate.	
Signature	Date		

Mail Completed Form and a copy of the purchase receipt to:

Continental Tire the Americas, LLC. - Customer Relations

Attn: Tire Safety Recall Program 1830 MacMillan Park Drive

Fort Mill, SC 29707 **Phone:** 1-888-799-2168 **Fax:** 1-888-847-3329

Email: continentaltire@custhelp.com