

## ARBITRATION REQUEST FORM

# For Disputes Over Coverage Under Warranty Extension Provided by Kia Engine Class Action Settlement Dispute Resolution Program

### Consumer Information

**NAME** (last, first, middle)

**STREET ADDRESS**

**CITY**

**STATE**

**ZIP**

**BEST DAYTIME NUMBER**

**EMAIL**

### Vehicle Information

**MAKE**

**MODEL**

**YEAR**

**VEHICLE IDENTIFICATION NUMBER**

### Other Information

**Were you given an extended warranty under to the Kia Engine Class Action Settlement?**

**What remedy are you seeking?**

(Please refer to the Summary of Eligibility and Remedies for your class action settlement, attached to this form.)

**Have you provided Kia with written notice of your request for arbitration?**

(Written notice to Kia of intent to arbitrate is required before you may pursue arbitration under this program.)

Yes

No

**If yes, on what date did you provide written notice to Kia?**

**VEHICLE OWNER'S SIGNATURE** (Form must be signed by vehicle owner):

**DATE:**

By signing and submitting this form, I am requesting arbitration under the *BBB National Programs Arbitration Program – Information and Rules for Disputes Over Coverage Under Warranty Extension Provided by Kia Engine Class Action Settlement.*

**RETURN THIS FORM VIA MAIL, EMAIL, OR FAX TO THE FOLLOWING ADDRESS:**

BBB National Programs  
ATTN: Kia Engine Class Action Settlement  
1676 International Drive, Suite 550, McLean, VA 22102  
EMAIL: ClassActionDR@bbbnp.org  
FAX: 703-247-9700

