

OPT OUT FORM

2011-2015 FORD EXPLORER EXHAUST ODOUR SETTLEMENT

OPT OUT FORM

**THIS IS NOT A REGISTRATION FORM OR A CLAIM FORM.
IT EXCLUDES YOU FROM THE SETTLEMENT CLASS.
DO NOT USE THIS FORM IF YOU WANT TO RECEIVE BENEFITS
UNDER THE SETTLEMENT.**

Name _____
Mr. / Mrs. / Miss / Ms. / _____

Business Organization
Name (if applicable) _____

Current Address _____
Apt/No/Street City Province Postal Code

Telephone/Email Home: () Work: ()
Cell: () Email Address: _____

Ford Explorer Model Year (Circle One) 2011 2012 2013 2014 2015

Vehicle ID # (VIN) _____

Identification of person signing this Opt Out Form

I am or was the owner or the lessee of the Ford Explorer vehicle identified. I am signing this Opt Out Form to EXCLUDE myself from entitlement to benefits under the Canada-wide Ford Explorer Exhaust Odour Settlement.

DATE: ____/____/____
Year Mo. Day

Name of Settlement Class Member

Signature of Settlement Class Member

ALL OPT OUT FORMS MUST BE SUBMITTED BY APRIL 17, 2018 TO:

Ford Explorer Settlement
c/o RicePoint Administration Inc.
PO Box 4454, Toronto Station A
25 The Esplanade
Toronto ON M5W 4B1