



## DECERTIFIED PART REIMBURSEMENT FORM

Distributors holding decertified CAPA parts are entitled to a refund, credit, or replacement from the applicable CAPA Participant (manufacturer). The CAPA Participant decides which form of reimbursement they will provide. The distributor must cut out the section of the part (a coupon) bearing the CAPA Quality Seal, and submit the coupon(s) to Intertek with this completed form within 90 days of public notice of decertification. "Public notice" refers to the decertification notices on the CAPA website, including the monthly listing of decertified parts.

### Process for distributors to obtain a refund, credit, or replacement of a decertified part.

Distributors send the completed form(s) and part coupons to the following address:

CAPA / Intertek  
 Attn: Decertified Part Reimbursement Program  
 4700 Broadmoor SE  
 Suite 200  
 Kentwood, MI 49512

Verification that public notice of the decertification took place within 90 days of receipt, and confirm that all information and coupons are correct.

A copy of the form will be forwarded to the applicable Participant and notification will be sent to the Distributor when this action has been taken.

The Participant must send the distributor and Intertek a completed Decertified Part Reimbursement Acknowledgement Form within 30 days, indicating which type of compensation they will provide. If the Participant does not acknowledge within this timeframe, the Participant may be removed from the program for a period of time to be determined as well as termination of its License Agreement.

|                                  |   |        |  |        |  |        |  |
|----------------------------------|---|--------|--|--------|--|--------|--|
| Date:                            |   |        |  |        |  |        |  |
| Distributor Company Name:        |   |        |  |        |  |        |  |
| Distributor Contact Name:        |   |        |  |        |  |        |  |
| Distributor Address:             |   |        |  |        |  |        |  |
| Phone Number:                    |   |        |  |        |  |        |  |
| Email:                           |   |        |  |        |  |        |  |
| Participant Part Number:         |   |        |  |        |  |        |  |
| Participant Lot Number:          |   |        |  |        |  |        |  |
| Part Description:                |   |        |  |        |  |        |  |
| Application Description:         | <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 20%;">Make:</td> <td style="width: 30%;"></td> <td style="width: 20%;">Model:</td> <td style="width: 20%;"></td> <td style="width: 10%;">Years:</td> <td style="width: 10%;"></td> </tr> </table> | Make:  |  | Model: |  | Years: |  |
| Make:                            |   | Model: |  | Years: |  |        |  |
| Participant Name (manufacturer): |   |        |  |        |  |        |  |
| Number of Coupons Enclosed:      |   |        |  |        |  |        |  |

This program applies to part distributors only. Others holding decertified parts should contact the seller of the part. Once the information submitted by the distributor has been verified, information will be forwarded to the applicable Participant, who must compensate the distributor within 90 days of notification. Distributor will be provided with acknowledgement of receipt of this form, results of verified coupons, and the date which the Participant was notified.

*Internal Use Only*

|                |  |            |  |
|----------------|--|------------|--|
| Date Received: |  | Signature: |  |
|----------------|--|------------|--|