

OUT-OF-POCKET COSTS – CLAIM FORM
In re Honda Idle Stop Litigation, Case No. 2:22-cv-04252

Eligibility

You are eligible for reimbursement if during the “Warranty Period” (10 years from the original date of sale or lease of your vehicle as a “new” vehicle), you paid to have your vehicle’s starter assembly replaced, your vehicle’s starter relays replaced, your vehicle’s valves adjusted, and/or paid to have your vehicle towed due to “AIS No-Restart”(“Out-of-Pocket Costs”). AIS No-Restart is a condition where, under certain circumstances, after coming to a stop and engaging the Auto Idle Stop System, your car’s engine may not restart automatically.

You are eligible for reimbursement for any Out-of-Pocket Costs reasonably incurred prior to August 8, 2025, even if the repair was not performed at an authorized Acura or Honda dealership.

For repairs after August 8, 2025, all repairs must be completed at an authorized Honda or Acura dealership during the Warranty Period or, if applicable, during the Extended Claim Period. You are still eligible for reimbursement for towing expenses incurred after August 8, 2025.

To determine whether you are a Class Member eligible to make a claim, or for more information regarding the class action Settlement, please first visit www.AutoIdleStopSettlement.com. If you still have questions regarding the claims process, call 1-888-888-3082.

Instructions

Please complete this form and attach the items listed below. Failure to include all requested information will result in delays and possible denial of your request.

- 1) **You can complete the Claim Form online at www.AutoIdleStopSettlement.com (see below), or on paper. Check the Claim Form carefully to make sure all of the information is correct and that you have filled in any missing information. If you are submitting a Claim Form for multiple invoices and/or more than one Covered Vehicle, you can copy this Claim Form and attach a separate sheet containing the information requested.**
- 2) **Capitalized terms in this Claim Form have the same meaning as provided in the Settlement Agreement, which is available at www.AutoIdleStopSettlement.com.**
- 3) **If you print this Claim Form, type or print legibly in blue or black ink. Do not use any highlighters. Provide all requested information to complete and submit this Claim Form and attach Required Documentation, as specified below.**

Required Documentation: To receive reimbursement, you must submit this Claim Form and proof of payment for Out-of-Pocket Costs actually paid, such as receipts, cancelled checks, credit card statements, invoices, or costs verifiable (“Required Documentation”). If the claim is for costs paid for a starter assembly replacement, starter relays replacement, or valve adjustment, you must also provide proof of such repairs (i.e. repair order) that occurred during the Warranty Period.

- 4) **For Out-of-Pocket Costs incurred prior to August 8, 2025, you must submit your completed Claim Form and any Required Documentation no later than the Claims Deadline, which is *no later than ninety (90) days after the date of entry of the Final Approval Order*. Please monitor the Settlement website, www.AutoIdleStopSettlement.com, to learn of key deadlines that are due to be set throughout 2025.**
- 5) **For Out-of-Pocket Costs incurred after August 8, 2025, you must submit your completed Claim Form and any Required Documentation by mail or electronically *no later than sixty (60) days after such Out-of-Pocket Costs are incurred*.**

- 6) The completed Claim Form and any Required Documentation can be submitted electronically (instructions below), or mailed to:

In re Idle Stop Litigation Claims Administration
PO Box 2718
Torrance, CA 90509

Important: Keep a copy of your completed Claim Form and the Required Documentation. Any documents you submit with your Claim Form will not be returned. Do not send original documents. If your claim is rejected for any reason, you will be notified.

Via QR:



Via Web: www.AutoIdleStopSettlement.com

Via Email: am_AHM_claims_administration@ahm.honda.com

Last Name:				First Name:				Middle Initial									
Home Address:								Apt. #:									
City:						State:		ZIP:									
Primary Phone:						Secondary Phone:											
Vehicle Identification Number																	
Email Address:																	
Total Claim Amount: \$																	

If you have any questions about this form, please contact American Honda's Customer Support & Campaign Center at 1-888-888-3082.

Please see the Settlement Agreement available at www.AutoIdleStopSettlement.com for information on your rights to dispute the denial of any requested reimbursement.