

## OPT-OUT FORM

ONLY SUBMIT THIS FORM IF YOU **DO NOT** WANT TO PARTICIPATE IN AND CLAIM BENEFITS UNDER THE PROPOSED SETTLEMENT.

**Instructions: This is not a registration form or a claim form.** Fill out and submit this form by mail, courier or email **ONLY IF YOU WISH TO BE EXCLUDED** from the proposed Hyundai and Kia ABS Module Class Action Settlement in Canada. **DO NOT** USE THIS FORM IF YOU WANT TO PARTICIPATE IN THE CLASS ACTION AND PROPOSED SETTLEMENT.

### 1. SETTLEMENT CLASS MEMBER IDENTIFICATION

Provide the following information about the person (i.e., the Settlement Class Member) submitting this Opt-Out Form, or, if applicable, on whose behalf you are submitting this Opt-Out Form.

Last Name:		First Name:		Middle Initial:
Address:			Apt. Number:	
City:	Province:	Postal Code:	Country:	
Phone Number:		Email Address (if available):		

### 2. REPRESENTATIVE IDENTIFICATION (complete this section only if you are submitting this Opt-Out Form on behalf of a Settlement Class Member who is deceased or for another reason)

If you are submitting this Opt-Out Form as a representative on behalf of a Settlement Class Member, please provide the following personal identification information (about you) **and attach a copy of the Certificate of Appointment of Estate Trustee, Continuing Power of Attorney for Property, or other document(s) establishing your authority to act on this person's behalf.**

YOU ARE SUBMITTING THIS FORM ON BEHALF OF SOMEONE WHO IS:				
<input type="checkbox"/> DECEASED <input type="checkbox"/> A MINOR <input type="checkbox"/> OTHER REASON (Identify: _____)				
Representative's Last Name:		Representative's First Name:		Representative's Relationship to Requestor:
Representative's Mailing Address:				Apt. Number:
City:	Province/State:	Postal Code/Zip Code:	Country:	
Representative's Phone Number:	Representative's Email Address:		Representative's Law Firm Name (if applicable):	

**NOTE: THIS OPT-OUT FORM WILL BE INVALID UNLESS SIGNED PERSONALLY BY THE SETTLEMENT CLASS MEMBER EXCEPT WHERE THE SETTLEMENT CLASS MEMBER IS DECEASED, A MINOR, OR LEGALLY INCAPACITATED.**

### 3. VEHICLE IDENTIFICATION

Please provide the following information concerning the Hyundai, Genesis, or Kia vehicle bought or leased in Canada. If there is more than one vehicle, please provide the following information for other vehicles in an attachment.

MANUFACTURER: <input type="checkbox"/> Hyundai <input type="checkbox"/> Genesis <input type="checkbox"/> Kia		
Vehicle Model:	Model Year of Vehicle:	Vehicle Identification Number (VIN):

### 4. PROOF OF OWNERSHIP

For each of the vehicles identified in section 3, **attach a copy of your proof of ownership**. If you own or previously owned the vehicle, please provide a copy of the vehicle's registration certificate or bill of sale. If you lease or previously leased the vehicle, please provide a copy of the lease agreement relating to the vehicle.

### 5. I WISH TO OPT OUT

Check **only** the applicable box below to confirm your intention to opt out of the proposed Hyundai and Kia ABS Module Class Action Settlement.

- ☐ I am a person who purchased or leased a Settlement Class Vehicle in Canada. I wish to be excluded from the proposed Hyundai and Kia ABS Module Class Action Settlement and am opting out. I understand that by opting out, I will not be eligible to receive any settlement benefits.

☐ I am the representative of the above-identified Settlement Class Member who purchased or leased a Settlement Class Vehicle in Canada. I am signing this Opt-Out Form on that Settlement Class Member's behalf to **EXCLUDE** that Settlement Class Member from the proposed Hyundai and Kia ABS Module Class Action Settlement. I understand that by submitting this Opt-Out Form, the Settlement Class Member will not be eligible to receive any settlement benefits. [Note: For this Opt-Out Form to be valid, you must attach a copy of the Certificate of Appointment of Estate Trustee, Continuing Power of Attorney for Property, or other document establishing your authority to act on the Settlement Class Member's behalf.]

### 6. SIGNATURE & DATE

\_\_\_\_\_  
Your Signature

\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_  
YYYY      MM      DD

If you wish to opt out of the proposed Settlement, **your Opt-Out Form and any attachment(s) MUST be received on or before November 3, 2025** by mail or courier at **ABS Module Settlement Administrator c/o P.O. Box 3355, London, ON N6A 4K3** or by email at **support@hyundaiabsmodulesettlement.ca (for Hyundai/Genesis)** or **support@kiaabsmodulesettlement.ca (for Kia)**.

If you submit this form, you will not be able to receive any benefits that may be available under the proposed Settlement unless you re-elect in writing to opt in to the proposed Settlement. Any re-election request MUST be received on or before **November 3, 2025** to the address or email address given above. After that date, you must obtain a Court order to be allowed back in to the proposed Settlement.

If you have questions before submitting this form, contact the Administrator by telephone at 1-888-777-9480 (for Hyundai/Genesis) or 1-888-808-8157 (for Kia), or by email at support@hyundaiabsmodulesettlement.ca (for Hyundai/Genesis) or support@kiaabsmodulesettlement.ca (for Kia).