Motor Vehicle
LEMON LAW
RCW 19.118

MOTOR HOME - REQUEST FOR ARBITRATION

BEFORE YOU COMPLETE THIS FORM:

1. Read the Motor Home Lemon Law booklet. If you have any questions after reading the booklet contact the Lemon Law Administration at the telephone numbers listed below. **NOTE: These are not the complete eligibility requirements of the Lemon Law**. Read the Lemon Law Motor Home booklet carefully to be certain that your vehicle meets ALL the eligibility requirements.
2. The minimum eligibility requirements for a vehicle are:
   • originally sold/leased at retail in Washington or
   • the vehicle belongs to an active member of the military living or stationed in Washington but was purchased or leased in another state, and otherwise meets the definition of a "new motor vehicle".
3. The following are the minimum diagnosis/repair attempt requirements for a defect to provide the basis for a claim:
   - at least one (1) attempt followed by a final repair notice/opportunity to diagnose or repair an existing 'serious safety defect'; or
   - two (2) or more 'serious safety defects' covered by the same manufacturer have occurred within 12 months (existing or repaired) during the eligibility period; or
   - at least three (3) attempts followed by a final repair notice/opportunity to diagnose or repair an existing 'nonconformity'; or
   - the vehicle has been out of service for 60 or more cumulative calendar days to diagnose or repair one or more substantial defects including days for a final repair notice/opportunity where a final repair notice has been sent to all manufacturers after 30 or more days out of service have accumulated.

   NOTE: If a manufacturer fails to respond timely to a final repair notice or fails to complete the repair within the time allowed, that manufacturer is not entitled to the final repair opportunity.
4. A written request for repurchase or replacement of the motor home must be sent to all first stage, final stage and component manufacturers to initiate the arbitration process. The manufacturers should be allowed 40 days to respond before you submit this form to the Attorney General's Office.
5. For a claim to be accepted for arbitration, a Request for Arbitration form must be received by the Lemon Law Administration within 30 months of the vehicle's original retail delivery date WHETHER OR NOT THE MANUFACTURERS' 40 DAY RESPONSE PERIODS HAVE EXPIRED.

INSTRUCTIONS

1. **Type or Print clearly and fully complete the Motor Home - Request for Arbitration form.**
   Failure to complete this Request for Arbitration form or supply the requested documents may result in delay or rejection of your request for arbitration. A copy of your Request for Arbitration form and documents will be provided to the manufacturer if your claim is accepted for arbitration.
2. Attach copies of documents or records requested ***(Do Not Submit Originals)***. If you do not have the document(s) requested, send a written request to the source (i.e. dealer, manufacturer, etc.) asking for the needed documentation. If you do not receive the documents, attach to the form a copy of the letter requesting the document(s) or an explanation why the copies cannot be included.
3. Submit your Request for Arbitration form and copies of documents to:

   Paper copies to: Lemon Law Administration
   Office of the Attorney General
   800 5th Avenue, Suite 2000
   Seattle, WA 98104-3188

   PDF copies to: lemon@atg.wa.gov
4. For additional information: Call Toll Free: 1-800-541-8898 Local: 206-587-4240
   Website: www.atg.wa.gov Email: lemon@atg.wa.gov Fax: 206-587-5636

I. CONSUMER INFORMATION

Name: _____
Please Print or Type Last First Middle Initial

Address: _____

City: _____ State: _____ ZIP: _____

Phone: Day: ( ) _____ Evening: ( ) _____ Cell phone: ( ) _____

Email: _____ Other registered owners: _____

II. VEHICLE INFORMATION

Make: _____ (Fleetwood, Winnebago, etc.) Model: _____ (Southwind, Sunseeker, etc.) Year: _____ Style: _____ (Class A, B, C or D, Van Camper, etc.)

Vehicle ID Number (VIN): _____ License Plate No.: _____

Original Delivery Date (month/day/year): _____ Present Mileage: _____

Original Sales/Lease Dealer: _____

Address: _____

City: _____ State: _____ ZIP: _____

State in which vehicle was originally registered: _____ Vehicle currently registered in: _____

Are you the original Owner? ☐ Yes ☐ No If no, you must submit a title history obtained from the Department of Licensing (call the Records Section at 360-902-3770 with the vehicle's license number).

Has the vehicle had any non-warranty repairs e.g due to fire, theft, vandalism, or collision? ☐ Yes ☐ No

III. YOUR CLAIM

What is the basis for your Request for Arbitration under the Lemon Law? Check all that apply

- ☐ Multiple Serious Safety Defects within 12 months, plus a final repair notice
- ☐ Existing Serious Safety Defect with 1 or more attempts to diagnose or repair, plus a final repair notice
- ☐ Existing Nonconformity with 3 or more attempts to diagnose or repair, plus a final repair notice
- ☐ 60 or more cumulative days out-of-service due to diagnosis or repair, including a final repair notice

IV. REQUIRED DOCUMENTS

You *must* submit copies of the following documents. (See Instruction #2 on the front page of this form if you cannot provide all documentation.) PLEASE DO NOT SEND ORIGINAL DOCUMENTS!

☐ Letters to each manufacturer (First Stage, Final Stage and Components) requesting a final repair attempt. If more than one, list each manufacturer, date of mailing and date received on a separate page and attach. Manufacturer, date letter mailed and date received: _____

☐ Letters to each manufacturer requesting replacement or repurchase. If more than one, list each manufacturer, date of mailing and date received on a separate page and attach. Manufacturer, date letter mailed and date received:

_____

☐ Repair Orders Listed in Section V ☐ Finance Agreement (if applicable)

☐ Current Registration ☐ Purchase Agreement /Lease Agreement

☐ All documents relating to non-warranty repairs e.g. due to fire, theft, vandalism, or collision.

You must provide a written explanation and/or a copy of letter(s) to the information source requesting the missing documents regarding copies of all documents not submitted with this form.

V. REPAIR HISTORY LISTED BY MANUFACTURER

If there is more than one defect, group by manufacturer and list each defect individually. When necessary, attach additional pages. Identify each attempt to diagnose or repair each defect. A repair order should be listed more than once if it relates to more than one defect. You must submit copies of repair orders; if any repair orders will not be submitted see Instruction #2.

Defect 1: Attributed To Manufacturer: _____ ☐ **Not sure**

Description: _____

Is this a 'serious safety defect'? ☐ Yes ☐ No Does the defect currently exist in the vehicle? ☐ Yes ☐ No

Repair Order#	Copy Enclosed	Date to Dealer	Date Vehicle Returned to You	Dealership Name	Mileage
	☐				
	☐				
	☐				
	☐				

Defect 2: Attributed To Manufacturer: _____ ☐ **Not sure**

Description: _____

Is this a 'serious safety defect'? ☐ Yes ☐ No Does the defect currently exist in the vehicle? ☐ Yes ☐ No

Repair Order#	Copy Enclosed	Date to Dealer	Date Vehicle Returned to You	Dealership Name	Mileage
	☐				
	☐				
	☐				
	☐				

Defect 3: Attributed To Manufacturer: _____ ☐ **Not sure**

Description: _____

Is this a 'serious safety defect'? ☐ Yes ☐ No Does the defect currently exist in the vehicle? ☐ Yes ☐ No

Repair Order#	Copy Enclosed	Date to Dealer	Date Vehicle Returned to You	Dealership Name	Mileage
	☐				
	☐				
	☐				
	☐				

Defect 4: Attributed To Manufacturer: _____ ☐ **Not sure**

Description: _____

Is this a 'serious safety defect'? ☐ Yes ☐ No Does the defect currently exist in the vehicle? ☐ Yes ☐ No

Repair Order#	Copy Enclosed	Date to Dealer	Date Vehicle Returned to You	Dealership Name	Mileage
	☐				
	☐				
	☐				
	☐				

V. REPAIR HISTORY LISTED BY MANUFACTURER - continued

Defect 5: Attributed To Manufacturer: _____ ☐ **Not sure**

Description: _____

Is this a 'serious safety defect'? ☐ Yes ☐ No Does the defect currently exist in the vehicle? ☐ Yes ☐ No

Repair Order#	Copy Enclosed	Date to Dealer	Date Vehicle Returned to You	Dealership Name	Mileage
	☐				
	☐				
	☐				
	☐				

Defect 6: Attributed To Manufacturer: _____ ☐ **Not sure**

Description: _____

Is this a 'serious safety defect'? ☐ Yes ☐ No Does the defect currently exist in the vehicle? ☐ Yes ☐ No

Repair Order#	Copy Enclosed	Date to Dealer	Date Vehicle Returned to You	Dealership Name	Mileage
	☐				
	☐				
	☐				
	☐				

Defect 7: Attributed To Manufacturer: _____ ☐ **Not sure**

Description: _____

Is this a 'serious safety defect'? ☐ Yes ☐ No Does the defect currently exist in the vehicle? ☐ Yes ☐ No

Repair Order#	Copy Enclosed	Date to Dealer	Date Vehicle Returned to You	Dealership Name	Mileage
	☐				
	☐				
	☐				
	☐				

Defect 8: Attributed To Manufacturer: _____ ☐ **Not sure**

Description: _____

Is this a 'serious safety defect'? ☐ Yes ☐ No Does the defect currently exist in the vehicle? ☐ Yes ☐ No

Repair Order#	Copy Enclosed	Date to Dealer	Date Vehicle Returned to You	Dealership Name	Mileage
	☐				
	☐				
	☐				
	☐				

MOTOR HOME MANUFACTURER INFORMATION

Final Stage Manufacturer
(i.e. the manufacturer that completed the motor home)

Firm Name: _____

Address: _____

Telephone: _____ FAX: _____ Email: _____

Contact name /title: _____

☐ I have enclosed a copy of this manufacturer's written warranty.

This warranty covers: Months: _____ Miles: _____

First Stage Manufacturer
(i.e. manufacturer of chassis, chassis cab, van)

Firm Name: _____

Address: _____

Telephone: _____ FAX: _____ Email: _____

Contact name /title: _____

☐ I have enclosed a copy of this manufacturer's written warranty.

This warranty covers: Months: _____ Miles: _____

Component Manufacturer 1
(e.g. other than the First or Final Stage Manufacturers, the manufacturers that directly warranted to you the Lemon Law covered portions of the motor home that are included in your Lemon Law claim like manufacturers of the engine, transmission, brake system, etc.)

Firm Name: _____

Address: _____

Telephone: _____ FAX: _____ Email: _____

Contact name /title: _____

☐ I have enclosed a copy of this manufacturer's written warranty.

This warranty covers: Months: _____ Miles: _____

Component Manufacturer 2

Firm Name: _____

Address: _____

Telephone: _____ FAX: _____ Email: _____

Contact name /title: _____

☐ I have enclosed a copy of this manufacturer's written warranty.

This warranty covers: Months: _____ Miles: _____

If your claim includes additional defects warranted by other component manufacturers, please provide an additional page identifying the above information for each.

VI. FINANCIAL INFORMATION

The following information will be necessary to calculate an award if it is determined that your vehicle should be replaced or repurchased. Most of the information can be found in the documents identified as REQUIRED DOCUMENTS in Section IV. Additional bills receipts or other proofs of payments must be submitted if you have paid any additional sales or repair related items including alternate transportation costs, towing charges, etc.

- Finance Charge: Identify interest payments for your loan or payment total for a lease.
- Service Contract, Undercoating or Rust-proofing Costs
- Credit Disability and Credit Life Insurance Costs
- Factory/Dealer Installed Options Costs
- Other Sales or Repair Related Costs
- Transportation or Dealer Prep Charges

Finance/Lease Company : _____

Address: _____

City : _____ State: _____ Zip: _____

VII. SCHEDULING INFORMATION

Please indicate the location(s) where you would be able to attend an arbitration hearing:

☐ Seattle ☐ Tacoma ☐ Spokane ☐ Tri-Cities ☐ Vancouver

Please list any dates during the ***next 60 days*** when you (or your attorney, if you have one) *will be* **unavailable** for an arbitration hearing: _____

Please indicate the hours you would prefer for your arbitration hearing:
☐ Morning hours ☐ Afternoon hours ☐ No preference

You have the right to be represented by an attorney.
Are you represented by an attorney? ☐ Yes ☐ No If yes, provide the following information:

Attorney Name: _____

Phone ( ) _____ Email: _____

Firm Name: _____

Firm Address: _____

City: _____ State: _____ ZIP: _____

NOTE: If you are represented by an attorney, correspondence will be directed to your attorney and a copy sent to you.

VIII. SIGNATURE

Your preferred method of communication about your claim is by: ☐ email ☐ mail

At the arbitration hearing you will be asked to decide whether you want the vehicle repurchased or replaced.
At the present time, which do you prefer? ☐ Replacement ☐ Repurchase

In the event that my vehicle is ordered repurchased or replaced I give permission to lienholders on the vehicle to release to the vehicle manufacturer documents and information to enable the manufacturer to comply with the arbitration decision.

I have read the above information and declare it to be true and accurate to the best of my knowledge.

NOTE: **ALL REGISTERED OWNERS MUST SIGN BELOW.**

Signature _____ County _____ Date _____

Signature _____ County _____ Date _____

Signature _____ County _____ Date _____