

INSPECTION, REPAIR OR REPLACEMENT PROGRAM CLAIM FORM

Complete the following form to participate in the Inspection, Repair or Replacement Program. You may submit this form online at www.suunto.com, <http://www.suuntodivecomputersettlement.ca>, in person at an authorized Suunto service center, or by mail to Suunto Dive Computer Settlement, c/o Equitas Class Action Claims Administration Services, P.O. Box 402, 3484 Boul. des Sources, Dollard-des-Ormeaux, Quebec, H9B 1Z9.

Make sure to provide accurate contact information as a Suunto representative will be contacting you shortly with information on how and where to send your Dive Computer for inspection.

For more information on the Inspection, Repair or Replacement Program, where to locate the serial number on your Dive Computer, and for a list of authorized Suunto service centers go to <http://www.suuntodivecomputersettlement.ca> or www.suunto.com.

Name:		
<i>Last</i>	<i>First</i>	<i>Middle Initial</i>
Your Address:		
<i>Number/Street/P.O. Box No.</i>		
City:	Province:	Postal Code:
Telephone Number:	Email Address:	
Dive Computer Serial Number:	Date of Purchase:	
Place of Purchase (name of store):	City and Country of Purchase:	

I affirm under penalty of law that the information in this Inspection, Repair or Replacement Claim Form is true and correct to the best of my knowledge, information and belief.

Signature _____

Date _____