

HONDA CANADA ODOMETER CLASS ACTION SETTLEMENT:

OPT OUT FORM

If you want to Opt Out of the Settlement, you **MUST** send the bottom portion of this form to the address listed below by the Opt Out Deadline of **May 18, 2009**.

Class actions were initiated against Honda Canada Inc. in the Ontario, Québec and British Columbia Courts that allege that odometers in certain Honda and Acura automobiles overstate mileage by up to 4% (the "Actions"). This alleged overstatement is claimed to diminish vehicle warranty coverage and mileage allowances under vehicle lease agreements. Honda denies liability.

On October 15, 2008, the parties reached an agreement to settle the Actions (the "Settlement"). To effect the Settlement, the Courts must certify the Actions, which has occurred, and approve the Settlement. Approval hearings are pending. The Settlement applies to the following Class:

All persons and legal entities who, while resident in Canada, purchased or leased in Canada a 2001-2006 model year (M/Y) Honda or Acura automobile, or a 2007 M/Y Honda Fit automobile, or a 2000 M/Y Honda or Acura automobile purchased or leased on or after November 14, 2000.

If you belong to this Class, and if you do not take steps to "Opt Out" of this Settlement, you will be bound by its terms. This means, among other things, that you will release Honda and other entities from all past, present and future claims you may have against them arising from or relating to the alleged overstatement of mileage in Class Vehicle odometers.

In order to Opt Out of the Settlement, you must send the Opt Out Form to the entities set out below. The Opt Out Form must be *received* by the relevant entity before the Opt Out Deadline, which is **May 18, 2009**:

IF RESIDENT IN QUÉBEC:

**Send by registered or certified mail to:
Clerk, Superior Court of Québec
300 Jean-Lesage Blvd.,
Québec, QC G1K 8K6**

IF RESIDENT OUTSIDE QUÉBEC:

**Send by regular mail or courier to:
The Honda Claims Centre
P.O. Box 500, Station D
Scarborough, ON M1ROA8**

Do not Opt Out if you want to participate in the Settlement.

OPT OUT FORM

I _____, wish to Opt Out of the Settlement.
(Name)

(Street Address)

(City) (Prov/Terr) (Postal Code)

(Daytime Phone Number) (Evening Phone Number)

(Signature of Resident Representative) (Date)

(Vehicle Identification Number, Vehicle Make and Model; Vehicle Model Year ; Date of Lease or Purchase)

By signing and returning this form, I understand that I will neither be eligible for the benefits the Settlement provides nor bound by the terms of the Settlement.