



3 1 1 9 5 0 0 0 0 0 0 0 0

**SAMPLE FORM AFFIDAVIT FOR PROPERTY DAMAGE BENEFITS CLAIM
NON-ASE-CERTIFIED MECHANIC**

To make a Property Damage Benefits claim, you **must** do **all** of the following:

- Complete the Property Damage Benefits Claim Form;
- Provide proof of ownership of the vehicle at the time you claimed it was damaged;
- Provide contemporaneous repair receipts, estimates, or work orders for the damaged vehicle; and
- Provide an affidavit from the National Institute for Automotive Service Excellence (“ASE”) certified mechanic or other person who repaired or diagnosed your vehicle’s damage.

If the damage to your vehicle was diagnosed by someone other than an ASE-certified mechanic, the affidavit from that person **must** contain **all** of the following information:

- a statement that no other obvious cause of damage was identified;
- a list of relevant experience supporting his/her ability to make the diagnosis; and
- a narrative explanation as to how s/he is able to make the diagnosis and how s/he is able to assert that it was the use of the DG Auto motor oil that caused the damage rather than other causes.

The affidavit is **TO BE COMPLETED BY** the person who made the repairs or inspected and diagnosed your vehicle’s damage.

A **sample form of affidavit** for use with Property Damage Benefits claims where the person who made the repairs or inspected and diagnosed the cause of damage was not an ASE-certified mechanic is attached. **Please note that this is an example only.** The form affidavit includes blanks for all required information, but any additional information to support the claim should be provided.

The affidavit **must** be **signed** by the person who made the repairs or diagnosed your vehicle’s damage and **notarized** and submitted with your Property Damage Benefits Claim Form.



3 1 1 9 5 0 0 0 0 0 0 0 0

**SAMPLE FORM AFFIDAVIT FOR PROPERTY DAMAGE BENEFITS CLAIM
NON-ASE-CERTIFIED MECHANIC
IN THE UNITED STATES DISTRICT COURT
FOR THE WESTERN DISTRICT OF MISSOURI
WESTERN DIVISION**

IN RE: DOLLAR GENERAL CORP.) MDL No. 2709
MOTOR OIL MARKETING AND)
SALES PRACTICES LITIGATION) Master Case No. 16-02709-MD-W-GAF
)
THIS PLEADING RELATES TO:)
)
ALL ACTIONS)
)

AFFIDAVIT OF

_____)
Insert Name

STATE OF _____)
) ss:
_____ COUNTY)

BEFORE ME, the undersigned authority, personally came and appeared _____,)
Insert your name
who after first being duly sworn did depose and state under oath as follows:

1. My name is _____)
Insert your name
this affidavit. I give this affidavit in connection with _____'s claim for Property)
Insert claimant's name
Damage Benefits in the Dollar General class action settlement. The facts stated herein are facts of my own
personal knowledge.

2. I am _____

*[This should be completed by either stating that you are: a mechanic or that you provided routine automotive
repair services to the Claimant for whom you are submitting this affidavit.]*

3. I understand that _____)
Insert claimant's name
in the Dollar General class action settlement based on the engine damage sustained to _____ vehicle from)
his/her
the use of DG Auto obsolete motor oil.



3 1 1 9 5 0 0 0 0 0 0 0 0

**SAMPLE FORM AFFIDAVIT FOR PROPERTY DAMAGE BENEFITS CLAIM
NON-ASE-CERTIFIED MECHANIC**

4. I personally _____
repaired OR diagnosed the damage to] [*insert claimant's name*] [*describe vehicle, ex. 2005 Honda Accord*
on or around _____ and I determined that no other obvious cause of the damage was identified.
Insert approximate date

5. _____

_____.

[In the blank space above, provide an explanation as to how you were able to diagnose that it was the use of one of the DG Auto motor oil at issue here (DG Auto SAE 30, DG Auto SAE 10W-40, or DG Auto SAE 10W-30) that caused the diagnosed damage as opposed to some other cause. Use as much space as needed to provide this explanation.]

6. _____

_____.

[In the blank space above, list your relevant experience to make this diagnosis as to the likely cause of damage to the claimant's vehicle. Use as much space as needed to provide this explanation.]

7. *[Include below or attach any additional information you believe would be helpful to the claim.]*

_____.

FURTHER AFFIANT SAYETH NOT.

Sworn to before me this _____
_____ day of _____, 2021.

Notary Public