



October 2010

**2004-2009 RX-8 Clutch Pedal Assembly Warranty Extension Program
Special Service Program (SSP) 82**

Dear Mazda Owner:

Mazda Motor Corporation has decided to conduct a Special Service Program (SSP) to extend the warranty coverage for the clutch pedal assembly (replacement of the clutch pedal assembly due to a problem with the clutch pedal bracket) on certain 2004-2009 RX-8 vehicles, produced from April 10, 2003 through September 13, 2008.

The warranty coverage for the clutch pedal assembly will be extended to 8 years (96 months) from the original warranty start date, with a 100,000 mileage limitation. If you are a recipient of this notice, your vehicle is included in this program.

On certain 2004-2009 RX-8 vehicles, it is possible that the clutch pedal bracket may have a crack, causing an abnormal noise. If the clutch pedal continues to be operated with this condition, the clutch pedal bracket may break, changing the disengagement point of the clutch and possibly preventing the shifting of gears.

If your RX-8 experiences this symptom, please make an appointment with a Mazda dealer to have the vehicle inspected. If the clutch and/or shifting problem is due to the broken clutch pedal bracket, your dealer will replace the clutch pedal assembly **free of charge**, during the terms of this warranty extension program.

If your vehicle is functioning normally, there is no need to contact your dealer. We suggest keeping this letter with the vehicle's warranty information booklet for future reference.

If you have already paid for the replacement of the clutch pedal assembly due to a problem with the clutch pedal bracket, you may be eligible for reimbursement of reasonable repair expenses based on Mazda's repair standards. Please complete the enclosed "Reimbursement Application Form," including the necessary documentation, and mail it to us in the pre-addressed envelope provided, allowing 6-8 weeks for processing.

To locate your nearest Mazda dealer, visit our web site and try our "Locate a Dealer" feature at www.MazdaUSA.com or consult your local yellow pages.

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If you have moved or no longer own your RX-8, please complete the enclosed prepaid *Information Change Card* as soon as possible. This enables us to update our records and notify the current owner. If you are a vehicle lessor receiving this notice, please take steps to ensure that this notice is forwarded to the lessee.

If you have any questions regarding this program, please contact our Customer Assistance Center at (800) 222-5500, option #6.

Your satisfaction is a priority for Mazda. We actively work to improve our products and search for solutions to improve your ownership experience. Please accept our apologies for any inconvenience this program may have caused you.

Sincerely,

Mazda North American Operations

REIMBURSEMENT PLAN

Requirements for Reimbursement

If you meet **all** of the following requirements, you are eligible to receive reimbursement under this plan:

1. You own or have owned a 2004-2009 RX-8 vehicle built between April 10, 2003 and September 13, 2008.
2. You have paid for the replacement of the clutch pedal assembly due to a problem with the clutch pedal bracket.
3. You have an original or legible copy of the paid repair order or invoice receipt showing:
 - Description of the concern reported
 - Replacement of the clutch pedal assembly
 - Itemized part(s) and labor charges
 - Vehicle model and year, and vehicle identification number (VIN)
 - Repair date (must be prior to the launch of this campaign)
 - Repair mileage
 - Name, address, and telephone number of the authorized Mazda Dealer or a licensed repair shop where such repairs were performed
 - Your name and address at the time of repair
4. Mail this reimbursement application form in the enclosed envelope to:

**Mazda North American Operations
Attn: Recall Reimbursement Dept
P.O. Box 57085
Irvine CA 92619-7085**

Procedure for Reimbursement Request

Once your vehicle has had the clutch pedal assembly replaced by an authorized Mazda dealer due to a problem with the clutch pedal bracket, you may apply for reimbursement by doing the following:

1. Complete the Reimbursement Application Form found on the reverse side of this page.
2. Mail the Reimbursement Application Form with a legible copy of the paid repair order and/or invoice using the enclosed envelope.
3. **Retain copies** of the paid repair order or invoice and this application form for your records.
4. You will be reimbursed for the amount you have paid for the replacement of the clutch pedal assembly due to a problem with the clutch pedal bracket.

If you wish to correspond with Mazda regarding this reimbursement plan, please write to the above address and refer to your vehicle identification number (VIN).

Any reimbursement application form that is incomplete, illegible, or sent without the legible copy of the paid repair order or invoice will be returned for completion. If Mazda has any questions concerning your application for reimbursement, you may be contacted. Please allow 6-8 weeks for processing.

REIMBURSEMENT APPLICATION FORM

2004-2009 RX-8 Clutch Pedal Assembly Warranty Extension Program SSP82

(Please type or print)

Name: _____
First Middle Last

Address: _____
Street Address

_____ City State Zip Code

Phone Number: Home: _____
 Work: _____

Vehicle Identification Number (VIN): _____
(17 digits in length)

Total Amount of Reimbursement Requested: _____
Dollars Cents

INSTRUCTIONS FOR GENERAL RELEASE DESCRIBED BELOW:

- Please read thoroughly
- Fill in vehicle identification number
- Sign the General Release (below)

General Release

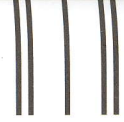
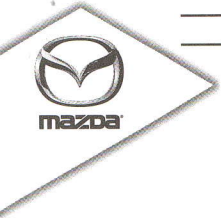
I am submitting to Mazda Motor Corporation ("Mazda") a claim for reimbursement for the replacement of the clutch pedal assembly performed to date in connection with a problem with the clutch pedal bracket. The vehicle identification number (VIN) is:

VIN: _____

In exchange for Mazda's payment of that claim, I hereby release Mazda, its agents, and its related entities from all claims for such inspection/repair costs. This release shall benefit Mazda and its authorized agent Mazda North American Operations, its regions/distributors (foreign and domestic), its authorized dealerships, and all their respective directors, officers, agents, employees, divisions, subsidiaries, and affiliated companies. This release shall bind my heirs, successors and assigns.

Dated: _____ Signed: _____

Return Address



Put Stamp
Here.
The Post Office
will not
deliver without
postage

**ATTN RECALL REIMBURSEMENT DEPT
MAZDA NORTH AMERICAN OPERATIONS
PO BOX 57085
IRVINE CA 92619-7085**

