

OBSOLETE

PLEASE SEE PG007-07 (superseding TSIB)



Technical Service Information Bulletin

January 18, 2002

Title:

REPLACEMENT VIN PLATES

Models:

All Models

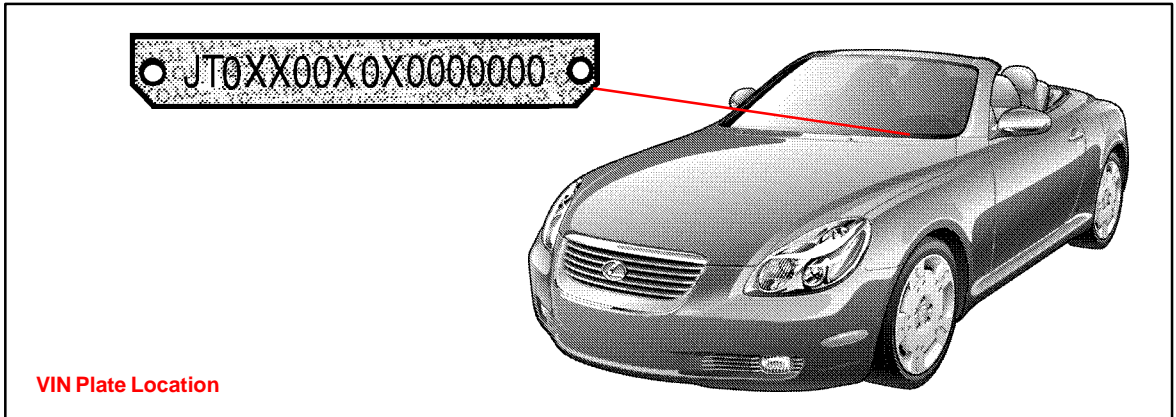
PRODUCT GENERAL INFORMATION
PG003-02

TSB UPDATE NOTICE:

The information contained in this TSIB updates PG016-01 dated May 4, 2001. Revised text is **red** and **underlined**. The changes will take place February 1, 2002.

Introduction

Replacement VIN plates (metal plates riveted to dashboard) **may be** available from Lexus providing the request meets the criteria listed below.



Applicable Vehicles

- All Lexus vehicles.

Replacement VIN Plate Criteria

- The vehicle is in an accident and the plate is damaged.

NOTE:

The original plate to be replaced MUST accompany the request.

NOTE:

If a plate is stolen, be sure to contact the State Police or your State's Department of Motor Vehicles (DMV). In most cases the State DMV will issue a unique number so that the original number can be included on stolen vehicle listings. If this is the case, a replacement plate is NOT available from Lexus. However, the original VIN, NOT the state issued VIN, must be used on all warranty claims.

Procurement Procedure

To request a replacement plate, complete a copy of the form on the back of this page. Note that the damaged VIN plate **MUST** accompany the request form. Your dealer parts account will be billed **\$25.00** for each replacement of a damaged plate.

NOTE:

All replacement plates for damaged and/or stolen vehicles are subject to approval by the Technical Compliance Department. If you have any specific questions, contact (310) 468-3390.

Warranty Information

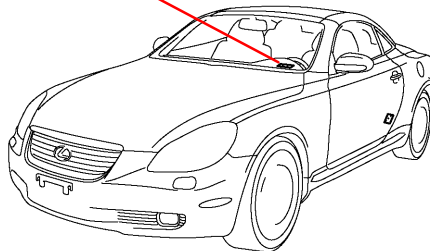
| OP CODE | DESCRIPTION | TIME | OPN | T1 | T2 |
|---------|----------------------------|------|-----|----|----|
| N/A | Not Applicable to Warranty | - | - | - | - |



Lexus Supports ASE Certification



APPLICATION FOR REPLACEMENT VIN PLATE



REASON FOR REPLACEMENT

ACCIDENT DAMAGE

OTHER _____

REASON/EXPLANATION

PLEASE PROVIDE CORRECT VIN _____



DEALER INFORMATION

DEALER CODE:

DEALER NAME: _____

ADDRESS: _____
STREET ADDRESS

CITY, STATE, ZIP CODE

TELEPHONE: () _____
AREA CODE, TELEPHONE NUMBER

CONTACT: _____
FIRST NAME, LAST NAME

MAIL (DO NOT FAX) THE COMPLETED REQUEST FORM WITH THE OLD PLATE TO:
TOYOTA MOTOR SALES, U.S.A. INC.
TECHNICAL COMPLIANCE DEPARTMENT, S207
19001 S. WESTERN AVENUE
TORRANCE, CA. 90509-2991