



**2. OWNERSHIP INFORMATION**

**Instructions:** Not all questions will necessarily apply to your situation. If documents need to be submitted with your Claim Form, please provide a copy, as indicated.

**A. Property Owners:**

- 1. Are you the current or former owner(s) of the property listed above?  Current  Former

If "Former," list the approximate dates you owned the property:

MM / DD / YYYY to MM / DD / YYYY  
Start Date End Date

- 2. Were you the owner of the property at the time the Solar Tiles were originally installed on the property?  Yes  No

If "Yes," but you no longer own the property:

When did you sell the property?

MM / DD / YYYY

To whom did you sell the property (if you recall)?

[Empty grid for name]

As part of the sales process, did you keep any rights with respect to any claim that the Solar Tiles were defective? (If you answer this question "yes," you may need to provide a copy of the sale documents.)  Yes  No

If "no:"

When did you purchase the property?

MM / DD / YYYY

Whom did you purchase it from (if you recall)?

[Empty grid for name]

Did the seller keep any rights with respect to any claim that the Solar Tiles were defective? (If "yes," you will need to provide a copy of the sale documents.)  Yes  No

- 3. Did you ever sell, assign, or otherwise transfer any rights you possessed to pursue claims that the Solar Tiles were defective or not performing properly? (If "yes," you will need to provide a copy of the documents you signed regarding the sale, assignment or transfer.)  Yes  No

**B. Other Claim Filers:**

If you believe you are a Settlement Class Member, but did not purchase a property with Solar Tiles, please explain the nature of your relationship to the Solar Tiles or Settlement Class and basis for your claim so the Claims Administrator can evaluate the claim. Please attach additional sheets or relevant documentation as needed.

\_\_\_\_\_

**3. SIGNATURE**

By signing this Claim Form, I declare that all the information that I supplied in this Claim Form is true and correct to the best of my knowledge and belief. By signing it, I authorize the Claims Administrator to contact contractors or any other parties with knowledge regarding the Solar Tiles and/or the information in this Claim Form.

Signature: \_\_\_\_\_ Dated: \_\_\_\_\_

Mail the Claim Form with the requested attachments, if any, as soon as possible, but no later than July 19, 2018 to:

Everett v. Pulte Group, et al. Settlement  
KCC Class Action Services  
P.O. Box 404041  
Louisville, KY 40233

**You may also submit your claim online by going to the website: [www.solartilesettlement.com](http://www.solartilesettlement.com).**

Keep a copy of your Claim Form and supporting documentation for your files.

