

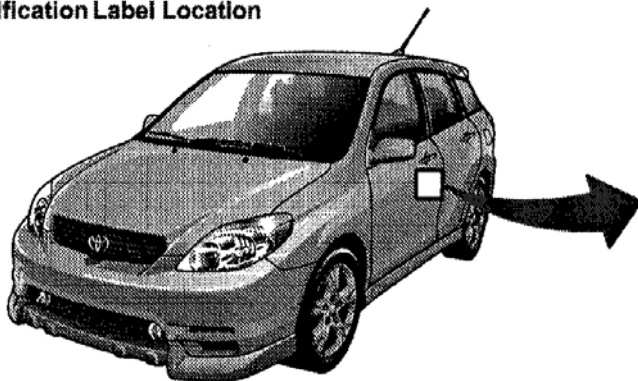
# COLLISION REPAIR INFORMATION

FOR THE TOYOTA DEALER

TITLE: REPLACEMENT CERTIFICATION LABELS PAGE 1 OF 2  
SECTION: GENERAL BULLETIN # 124  
MODELS: ALL TOYOTA/LEXUS MODELS  
DATE: MAY 2002

Replacement certification labels (vinyl label affixed to driver's door or "B" pillar) **may be** available from Toyota/Lexus for vehicles involved in a collision where the label was damaged or is attached to a part that will be replaced during a repair.

## Certification Label Location



MFD.BY: TOYOTA MOTOR MANUFACTURING  
CANADA INC. 10/01  
GVWR 3935LB GAWR FR 1970LB RR 1985LB  
THIS VEHICLE CONFORMS TO ALL APPLICABLE  
FEDERAL MOTOR VEHICLE SAFETY, BUMPER, AND  
THEFT PREVENTION STANDARDS IN EFFECT ON  
THE DATE OF MANUFACTURE SHOWN ABOVE.  
XT0XX00X0X000000 PASS.CAR



C/TR:3L5/FB14 MODEL:ZZE134L - DHPNKA  
A/TM:-04A/U341F MADE IN CANADA  
S26 AA01904759

To request a replacement label, make a copy of the attached application, fill out all the information and take it to your Service or Parts Manager for processing. The dealer parts account will be billed \$25.00 for each replacement label.

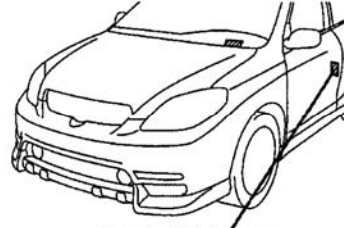
## Note:

- The original label **MUST** accompany the application form, or the order will be delayed significantly.
- A new label may not be available if the vehicle is more than five years old and/or if the old label is not attached to the application.
- All replacement labels for damaged vehicles are subject to approval by the Toyota Technical Compliance Department.  
If you have any questions, contact (310) 468-3390

**PLEASE ROUTE THIS BULLETIN TO YOUR COLLISION REPAIR CENTER MANAGER  
AND COLLISION REPAIR TECHNICIANS**



**APPLICATION FOR REPLACEMENT CERTIFICATION LABEL**



**REASON FOR REPLACEMENT**

- ACCIDENT DAMAGE
- STOLEN
- OTHER \_\_\_\_\_

REASON/EXPLANATION

PLEASE PROVIDE CORRECT VIN \_\_\_\_\_

ATTACH ORIGINAL LABEL HERE

**NOTE:**  
Original label **MUST** accompany this application or order will be significantly delayed.

**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 LABEL TO:**

**TOYOTA MOTOR SALES, U.S.A. INC.  
TECHNICAL COMPLIANCE DEPARTMENT, S207  
19001 S. WESTERN AVENUE  
TORRANCE, CA 90509-2991**