

SUBSEQUENT YEAR CLAIM FORM

The Abitibi/ABTco Siding Claims Program

Please Fill Out This Form If You Are Making A Claim For Siding On A Structure, and This Is Not Your First Claim Under The Claims Program For This Structure. See www.abtcoclaims.com for more information.

Under the Class Action Settlement approved by the Court, Claimants must complete and file this Claim Form to be eligible for compensation under the ABTco Siding Claims Program for Claims made after the initial Claim on the structure.

Please type or print your responses in ink. We may ask for additional information if it is required to process your Subsequent Year Claim.

This Subsequent Year Claim will be evaluated and determined on the basis of the information required by this form and information already in our system from one or more previous inspections. In addition, the Abitibi/ABTco Decking Claims Office may contact you to arrange for another on-site inspection of the structure and the siding to obtain additional information, if allowed under the Settlement.

Please review the contents of this Claim Package. It should include the following: (1) a 5 page claim form including a photo log; and (2) 3 pages of the attached instructions. If you need a camera to take the required photographs, please contact the Abitibi/ABTco Decking Claims and they will send you a free, disposable camera. If you have requested the Subsequent Year Claim Form from the Decking Claims Office (1-800-549-4465), a pre-addressed mailing envelope and a disposable camera are also included.

You may only file a Claim if you are a current owner of a structure on which Abitibi/ABTco Hardboard Siding (the “Siding”) was installed and you meet certain other criteria that may apply and are more particularly described in the Notice of Settlement of Class Action (the “Notice”). Please refer to the Notice for further details.

You can obtain the Notice at <http://www.abtcoclaims.com/longform.htm>

Mail the completed Claim Form Package (including the photographs), a signed original of the claim form, and all required supporting documentation to:

Abitibi/ABTco Decking Claims
1610 West End Avenue, Suite 200
Nashville, TN 37203
1-800-549-4465

The Abitibi/ABTco Decking Claims office may make an offer to you based on the information in this form and the information already in the system from prior inspections. **If an offer is made and you are not satisfied with it, you have the right to reject the offer and have your home inspected by contacting the Decking Claims Office within 45 days after receiving the offer. If you have already cashed or deposited your check, you still have 30 days to revoke your acceptance but to do so you must return the amount of the check to the Decking Claims Office and state in writing you wish to have your claim inspected and determined based on another inspection.**

SUBSEQUENT YEAR CLAIM FORM

FOSTER, et al. vs. ABTco, Inc. et al.
Instructions are attached to this Form

SUBSEQUENT YEAR CLAIM FOR SIDING (FOR HOMES WITH ABITIBI/ABTco HARDBOARD SIDING)

Ownership Status of Claimant:

I am the current owner of the home.

**A. Claimant's Name, Mailing Address,
ZIP Code and Phone Numbers
(Include ALL Claimants/Co-Owners):**
(See Paragraph A of the instructions.)

(1) _____
Name Title

Daytime Phone Evening Phone

Street Address

City State Zip

(2) _____
Name Title

Daytime Phone Evening Phone

Street Address

City State Zip

(3) _____
Name Title

Daytime Phone Evening Phone

Street Address

City State Zip

Street Address

City State Zip

**Property Address of the Home/Structure with
Abitibi/ABTco siding**
(If different from above. DO NOT use a P.O. Box.)

B. Questions about Your Home:
(See Paragraph B of the instructions.)

- I am currently posting, listing or advertising the Home for sale.*
 *I am currently experiencing water intrusion into the structure
and have attached any contracts or estimates for repair work.*

C. Proof of Current Property Ownership:

*I have included the documents described in Paragraph C of the
instructions to show that I still own the home.*

D. Proof of Damage to Abitibi/ABTco Siding:

*I have included the attachments described in Paragraph D of
the instructions, including photographs.*

THE PHOTOGRAPHS ARE THE MOST IMPORTANT PART OF YOUR CLAIM PACKAGE.

(Please follow the instructions in Paragraph D carefully. You cannot email us photographs; you must send prints to us)

Description of Damaged Siding
(damage definitions can be found at:
<http://www.abtcoclaims.com/definition.html>.)

Describe the siding damage as it appears on the FRONT of the structure today.

Length of the front of the structure: _____ feet

Describe the siding damage as it appears on the LEFT SIDE of the structure today.

Length of the left side of the structure: _____ feet

Describe the siding damage as it appears on the RIGHT SIDE of the structure today.

Length of the right side of the structure: _____ feet

Describe the siding damage as it appears on the BACK of the structure today.

Length of the back of the structure: _____ feet

ABITIBI/ABTCO SIDING CLAIMS PROGRAM PHOTO LOG

Please label each picture.

Include a description of the side depicted and the location of damage on the side.

Description of Damage:

Picture #1 _____

Picture #2 _____

Picture #3 _____

Picture #4 _____

Picture #5 _____

Picture #6 _____

Picture #7 _____

Picture #8 _____

Picture #9 _____

Picture #10 _____

Picture #11 _____

Picture #12 _____

Picture #13 _____

Picture #14 _____

Picture #15 _____

Picture #16 _____

Picture #17 _____

Picture #18 _____

Picture #19 _____

Picture #20 _____

Picture #21 _____

Picture #22 _____

Picture #23 _____

Picture #24 _____

Picture #25 _____

Picture #26 _____

E. Painting History Since Your Last Claim
(See Paragraph E of the instructions.)

First Repainting: ____/____
Month/Year
Second Repainting: ____/____
Month/Year
Third Repainting: ____/____
Month/Year
Fourth Repainting: ____/____
Month/Year

F. Other Payments or Compensation:
(See Paragraph F of the instructions.)

I have received compensation or payments for damage, repair, or replacement of the siding. Do not include prior settlement payments from the Abitibi/ABTco Decking Claims Office or Louisiana Pacific Corp.

Money received

Source Date received

Compensation other than Money

Source Date received

G. Tax Information
(See Paragraph G of the instructions.)

Are you a FORMER Owner of the Property who has filed a claim regarding Abitibi or ABTco Siding?

- Yes
- No

Have you previously deducted on your federal income tax return(s) the ORIGINAL cost of installing Abitibi or ABTco Siding?

- Yes
- No

Have you previously deducted on your federal income tax return(s) the cost of repairing or replacing any of your Abitibi or ABTco Siding?

- Yes
- No

Social Security Number OR Employer Identification Number

Social Security Number OR Employer Identification Number

H. Assistance with this Form:
(See Paragraph H of the instructions.)

Check here if anyone helped you to prepare this form.

Name Title

Phone Number

Street Address

City State Zip

ALL CLAIMANTS MUST SIGN THE FOLLOWING OATH AND CERTIFICATION.

I certify under penalty of perjury that to the best of my knowledge, information and belief, the information on this Subsequent Year Claim for Siding (and additional sheets) is true and correct. I agree to replace any siding covered by this claim, or if I do not replace the siding, I agree to disclose to any subsequent purchaser of the property from me the existence of the Settlement Agreement and the amount of any payment I receive relating to this claim.

The Undersigned also agree(s) to cooperate with ABTco and the Decking Claims Office in the investigation of this Claim, including, if requested, allowing an inspection of the structure.

Signature of Property Owner

Signature of Property Co-Owner

Date

Return this completed form & required attachments to: Abitibi/ABTco Decking Claims, 1610 West End Ave., Suite 200, Nashville, TN 37203

HOW TO FILL OUT A CLAIM FOR DAMAGED SIDING ON A HOME CONSTRUCTED ON SITE

ATTACHMENT CHECKLIST:

Photographs of existing damage to Abitibi/ABTco siding

Proof of Current Property Ownership consisting of:

- * Property Deed (If you are a NEW owner of the home and you have never filed a claim before) or
- * Current Proof of Ownership if you have filed a claim on this structure before (*See Paragraph C For Instructions*)

*Documentation showing when the siding was painted, if available

- A. Name of Property Owners/Claimants:** Include all co-owners/claimants for the home (first name, middle initial, last name). If there are more than three co-owners/claimants, please provide the name, phone numbers, and address of additional owners on a separate sheet of paper. It is essential that this Claim Form be signed by each and every owner. NOTE: if claimant is other than an individual, state the name and capacity of the person completing this form (i.e. Trustee, Officer, Partner, etc.) above the word "Title."
- B. Answering Questions about Your Home:** If you are currently offering your home for sale, please provide a copy of the advertisement or real estate listing agreement. If you are experiencing water intrusion and have entered into any contracts to repair water damage, please provide a copy of any estimates or contracts for repair work. NOTE: The Siding Claims Program does not pay for water damage to materials other than the siding, but claimants who have signed contracts to repair water intrusion problems or have their house listed for sale may be entitled to have their claim processed earlier than other claimants.
- C. Proof of Property Ownership:** You must include valid proof that you are, or were, the owner of the structure, or of the claim. You must provide a copy of the Property Deed with the address of the Property showing you as the Property Owner ONLY if you are a New Property Owner AND have never filed a claim before. In addition, please include one of the following:
If you have already filed a claim with Abitibi/ABTco, please provide one of the following documents with a current date:
1. A current tax bill;
 2. A current tax report;
 3. A current utility bill showing the property address;
 4. A current homeowner's insurance bill;
 5. A current declaration page from a policy of property insurance;
 6. A current mortgage statement; OR
 7. A current title insurance declaration page.
- D. Proof of Damage to Abitibi/ABTco Siding:**
1. Photographs
- THE PHOTOGRAPHS ARE THE MOST IMPORTANT PART OF YOUR CLAIM PACKAGE. WE CANNOT ACCEPT EMAIL PHOTOGRAPHS**
- The Decking Claims Office has enclosed photographs from your prior claim which shows damage already compensated.
 - First, you must photograph each side of the structure.
Using a camera, please take at least one clear photograph of each side of the structure.

(4 photographs: front, back, left side, right side) Each photograph should show the entire side from directly in front of that side.

Fill out the attached Photo Log to describe the content of the photos you take. For example, “ Photo #1 – Front of house.”

- Second, take pictures of any siding that is damaged since your last claim (new damage). See enclosed photographs for reference. Take the photographs close enough to the siding so that someone looking at the picture can see why you believe the siding is damaged. If you wish, you may show the siding is soft, warped, experiencing thickness swell or edge checking or another defect by showing a thumb or another object deforming or penetrating the siding. This may aid in the assessment of damage to your siding.

Fill out the attached Photo Log as you take the pictures and describe the area of the structure in the picture and the damage you intend to show in the picture.

- Third, obtain hard-copy prints of the photographs. Obtain **3” x 5” color** prints of all of the photographs that you take. You will have to pay the cost of developing and/or printing these photographs. (You may want to keep a second set of prints of the photos for your personal records.)
- Fourth, number the back of each photograph. Make sure that you number the backs of the pictures so that they correspond to the descriptions that you wrote down in the numbered paragraphs of the Photo Log.

Include all of the photographs in the packet that you return to us with this Claim Form.

2. Descriptions: In the space provided on the form, describe the damaged siding for which you are making a claim. Explain what you think is wrong with the siding. Definitions of what is “damage” under the Settlement are listed at <http://www.abtcoclaims.com/definition.html>. Give a separate description for each side of the home.

Measure the Length of each side of your house. If you are unable to measure each side, provide a good estimate of the total length of each side of the house and fill in the number of feet in the space provided.

E. Painting History: Please provide the month/year for each TIME your home (or any portion of it) was painted since your last Claim was filed. It is important that you provide the correct dates as best you can. If you have any trouble with providing this information, please explain why on this form. As an option, you may attach any receipts or contracts you have for paint or painting..

F. Other Payments or Compensation: Provide information regarding any payment you may have received for damage, repairs, replacements or previous claims regarding the Abitibi/ABTco siding from any other source, including builders, developers, contractors, manufacturers, or insurers. Do not include information about prior payments from the Abitibi/ABTco Decking Claims office or Louisiana Pacific Corp. under this settlement For each payment, identify the source of the payment and the amount of money that you received.

G. Tax Information: We need this information to comply with IRS reporting requirements. Failure to provide this information will delay the processing of your Claim and any related payment. You *must* respond to each of the questions in this section.

1. If you answered “No” to ALL of these questions - You may proceed to the Oath and Certification.
2. If you answered “Yes” to ANY of these questions - Please provide your Taxpayer Identification Number (TIN) in the space provided. For individuals, this will be your Social Security Number. For other entities, it is your Employer Identification Number (EIN). If you have applied for, but have not received, a TIN or an EIN, write “Applied For” in the space provided.

The amount of any recovery you receive must be reported to the Internal Revenue Service on Form 1099 MISC.

H. Assistance with this Form: If anyone helped you prepare this form, please provide that person’s name, company, address, and phone number in the space provided.

I. Signature(s): All owners or their legal representative must sign and date the form. If you are signing on behalf of another party (such as a homeowners’ association), attach proof of authority or power of attorney.

If you have questions, you can call the Abitibi/ABTco Decking Claims Office at 1-800-549-4465.