

Allen v. Husqvarna Professional Products Inc.
In the United States District Court for the Western District of North Carolina
Case No. No. 3:24-cv-FDW-SCR

Settlement Claim Form

If you are a Class Member and wish to receive a voucher, your completed Claim Form must be submitted online at www.grasstrimmersettlement.com on or before January 2, 2026.

Please read the full notice of this Settlement (available at www.grasstrimmersettlement.com) carefully before filling out this Claim Form.

Potential \$45 Voucher Award: To be eligible to receive a \$45 voucher, you must have purchased a Husqvarna gas-powered grass string trimmer with model numbers **130C** (SKU # 970514301, 970514302, 970514303, 970694601, 970694701), **130L** (SKU # 970514401, 970514402, 970514403, 970694801, 970694901), or **330LK** (SKU # 970514501, 970514502, 970514503, 970514504, 970545001) (collectively, the “Class Products”), on or before November 13, 2023 (the “Class Period”), and satisfy the following requirements:

- **You must first participate in the Consumer Product Safety Commission recall by delivering your grass trimmer for repair or replacement to a Husqvarna authorized dealer between October 3, 2025 and January 2, 2026 (the “Claim Period”). Click [here](#) to locate a Husqvarna dealer, and then return to fill out this Settlement claim form by January 2, 2026. The CPSC recall page can be found at <https://www.cpsc.gov/Recalls/2024/Husqvarna-Recalls-Grass-Trimmers-Due-to-Fire-Hazard>**
- **If you purchased more than one affected grass trimmer that is part of the settlement, you must submit information for each such product on the claim form.**

PART ONE: CLAIMANT INFORMATION

Provide your name and contact information. It is your responsibility to notify the Settlement Administrator of any changes to your contact information after the submission of your Claim Form.

FIRST NAME	LAST NAME	
STREET ADDRESS		
CITY	STATE	ZIP CODE

QUESTIONS? VISIT www.grasstrimmersettlement.com OR CALL 1-888-462-7662

EMAIL ADDRESS

PART TWO: GRASS TRIMMER AND RECALL INFORMATION

YOUR GRASS TRIMMER SKU NUMBER:

YOUR GRASS TRIMMER SERIAL NUMBER:

APPROXIMATE DATE OF PURCHASE:

DATE GRASS TRIMMER WAS DELIVERED FOR REPAIR:

NAME OF REPAIR FACILITY WHERE RECALL REPAIR WAS PERFORMED:

STREET ADDRESS (OF REPAIR FACILITY)

CITY (OF REPAIR FACILITY)

STATE

ZIP CODE

<input type="text"/>	<input type="text"/>	<input type="text"/>
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IF YOU PURCHASED MORE THAN ONE AFFECTED GRASS TRIMMER, FILL OUT INFORMATION FOR EACH UNIT BY CLICKING “ADD ANOTHER UNIT” BELOW

[ADD ANOTHER UNIT] (pressing this button will create a drop down identical to Part Two above for as many additional units as Class Members wish to add)

PART THREE: PREFERRED METHOD OF RECEIPT OF VOUCHER

You can elect to receive a voucher by mail or email. Please select one option below:

☐ EMAIL (to email address provided above in Part One)

QUESTIONS? VISIT www.grasstrimmersettlement.com OR CALL 1-888-462-7662

☐ MAIL (to mailing address provided above in Part One)

PART FOUR: PROOF OF DELIVERY FOR RECALL REPAIR

Attach a copy of proof of delivery of the product for the Recall repair, as provided by the Dealer.

PART FIVE: ATTESTATION UNDER PENALTY OF PERJURY

I declare under penalty of perjury under the laws of the United States of America that (1) I purchased the Class Product listed above, (2) I have participated in the Recall conducted in cooperation with the Consumer Product Safety Commission within the Claim Period, and (3) all of the information on this Claim Form is true and correct to the best of my knowledge.

I understand that my Claim Form may be subject to audit, verification, and Court review.

SIGNATURE	DATE

Please keep a copy of this Claim Form for your records.