



COOPER TIRE & RUBBER COMPANY  
Findlay, Ohio 45840 419-423-1321

June 15, 2012

Dear Dealer:

This notice is sent to you in accordance with the requirements of the National Traffic and Motor Vehicle Safety Act.

Cooper Tire & Rubber Company has decided that a non-compliance which relates to motor vehicle safety exists in all tires identified as follows:

**Cooper Tire Recall #156**

<b>Product Name</b>	<b>Size</b>	<b>DOT Serial Number</b>	<b>Owner</b>
Cooper Discoverer H/T	LT235/85R16 L.R. E	UT 0R C5M 5011	Cooper
Cooper Discoverer H/T	LT235/85R16 L.R. E	UT 0R 1BH 5011	Cooper
Mastercraft Courser HTR	LT235/85R16 L.R. E	UT 0R FL8 5011	Cooper
Cooper Discoverer H/T	P265/70R17	UT T6 C5U 0112	Cooper
Cooper Discoverer LSX	265/70R17	UT 1Y CL7 0112	Cooper

Cooper Tire & Rubber Company has determined that the affected tires may contain an unauthorized stock in the tread. The presence of this material may precipitate the formation of voids which could result in early life tread separations. In some cases, the tread or chunks of tread may separate from the tire casing resulting in body damage to the vehicle or in rare cases a driver may lose control resulting in a vehicle crash. Driving at highway speeds should be avoided until the tires have been inspected and replaced if they fall within the identification numbers shown above.

Cooper Tire & Rubber Company is recalling all of the tires with the identification number(s) above. Effective immediately, you or your dealers must not sell any of the tires listed and described above.

You should also comply with the following instructions regarding the return of new and used recall tires at no charge in accordance with such provisions.

**PROCEDURE FOR RETURN AND CREDIT OF RECALLED TIRES**

**NEW TIRES:**

All recalled new tires existing in your inventory, or in your sub-dealers' inventories, should be returned immediately in one shipment, freight collect to the designated inspection point for your area as indicated on the attached map. To assure proper handling, these tires

should be listed on the enclosed standard Tire & Tube Claim Form. In order to expedite the sorting and crediting process, please use a crayon and write the words, "New Recall" on the sidewall of the tire and on the Claim Form.

Upon verification by Cooper Tire that the tires returned are within the recall group, we will issue credit to you based upon your last invoice price of the tires.

### **USED TIRES:**

Cooper Tire's registration records are being searched and consumers who have purchased tires with the subject identification number(s) are being notified of the RECALL. Attached for your information is a copy of the notification being sent to such consumers. Tires removed from consumer vehicles as a result of this RECALL should be replaced with tires of like size and construction bearing identification numbers other than those listed above.

We have advised the consumer to return his recalled tire(s) and his letter to you. If your inspection verifies that the consumer has a tire(s) with the suspect identification number, the tire(s) should be replaced, mounted and balanced at no charge, if presented for remedy within sixty (60) days after (i) receipt of this letter or (ii) notice that a replacement tire(s) is available (if not available at the time of the inspection). It is expected that replacement tire(s) will be available at the time of inspection. However, if the tires are not available at the time of inspection, they will be available within twenty-one (21) days. After expiration of the sixty (60) days, tires will be replaced under our normal adjustment policy.

We have advised the consumer that it will take approximately thirty (30) minutes each to replace the recalled tires. For any tires removed from consumer vehicles during such sixty (60) day period, Cooper Tire will authorize an allowance of \$17.50 per tire to cover mounting and balancing.

### **"YOU ARE PROHIBITED BY FEDERAL LAW FROM SELLING NEW OR USED TIRES COVERED BY THIS NOTIFICATION."**

Tires removed from consumer vehicles must be listed on our standard Tire and Tube Claim Form. The Claim Form must be properly completed and signed by the consumer and the consumer's copy of the recall letter attached.

For the purpose of the RECALL, the Claim Form must include RECALL tires only. The word "RECALL" must be printed directly below the name and address on the claim form. All tires should be identified in crayon with the Claim Form reference number per standard adjustment procedures. Also, please write the words, "Used Recall" on the sidewall of the tire.

Upon verification by Cooper Tire, credit will be issued to you on a no charge replacement basis if replaced by you and returned to Cooper on or before ninety (90) days after notice of this RECALL.

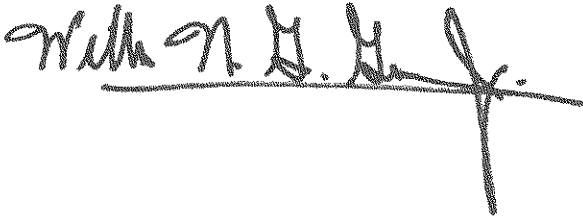
All Claim Forms for both "New Recall" and "Used Recall" tire(s) should be mailed to Cooper Tire & Rubber Company using the standard tire adjustment procedures. Please mail the claim forms one to two days before shipping the tires. Remember: DO NOT ship the Claim Forms with the tires.

*You should return in one shipment all recalled new and used tires to the inspection point as indicated on the attached map. These tires should be classified as SCRAP and shipped as SCRAP RUBBER TIRES, freight collect. Freight collect privileges apply only within the prescribed time period. Any tires returned after the designated time will be handled under our regular tire adjustment procedures.*

*Cooper Tire requests that you advise it of those customers of yours, if any, who have purchased any of the tires described above for which registration forms have not previously been submitted so that such customers can be advised of the recall and the replacement of their recalled tires can be scheduled.*

*We certainly apologize for any inconvenience this may cause you. If you have any questions pertaining to the implementation of this RECALL or need assistance, please contact Cooper Tire Consumer Relations Department at (800) 854-6288.*

*Sincerely,*

A handwritten signature in dark ink, appearing to read "William N. G. Geaman, Jr.", with a long horizontal line extending to the right and a vertical line crossing it.

*William N. G. Geaman, Jr.  
Manager, Consumer Quality Systems*

*Attachments:*

*Cooper Tire Consumer Letter  
RIP Map  
Shipping Instructions  
Bill of Lading (BOL) Form  
BOL Envelope  
Tire and Tube Claim Form*





COOPER TIRE & RUBBER COMPANY  
Findlay, Ohio 45840 419-423-1321

June 15, 2012

Dear Customer:

This notice is sent to you in accordance with the requirements of the National Traffic and Motor Vehicle Safety Act.

Cooper Tire & Rubber Company has decided that a non-compliance which relates to motor vehicle safety exists in all tires identified as follows:

**Cooper Tire Recall #156**

<b><u>Product Name</u></b>	<b><u>Size</u></b>	<b><u>DOT Serial Number</u></b>	<b><u>Owner</u></b>
Cooper Discoverer H/T	LT235/85R16 L.R. E	UT 0R C5M 5011	Cooper
Cooper Discoverer H/T	LT235/85R16 L.R. E	UT 0R 1BH 5011	Cooper
Mastercraft Courser HTR	LT235/85R16 L.R. E	UT 0R FL8 5011	Cooper
Cooper Discoverer H/T	P265/70R17	UT T6 C5U 0112	Cooper
Cooper Discoverer LSX	265/70R17	UT 1Y CL7 0112	Cooper

Cooper Tire & Rubber Company has determined that the affected tires may contain contaminated rubber in the tread compound which could result in a tread separation. In some cases, the tread or chunks of tread may separate from the tire casing resulting in body damage to the vehicle or in rare cases a driver may lose control resulting in a vehicle crash. Driving at highway speeds should be avoided until the tires have been inspected and replaced if they fall within the identification numbers shown above.

Cooper Tire & Rubber Company is recalling all of the tires with the identification number(s) above. To insure your safety and satisfaction with our product, we request that you return the recalled tires and this letter to your dealer. If the inspection verifies that you have a tire or tires with the suspect identification number, they will be replaced, mounted and balanced at no charge to you if you have presented them for remedy within sixty (60) days after (i) receipt of this letter or (ii) notice that a replacement tire is available (if not available at the time of inspection). It is expected that replacement tires will be available at the time of the inspection. However, if the tires are not available at the time of inspection, they will be available within twenty-one (21) days. After expiration of the sixty (60) day period, tires will be replaced under our normal adjustment policy.

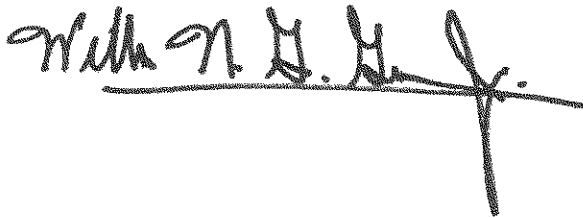
The time required to determine if the tire is subject to RECALL is only a few minutes and approximately thirty (30) minutes per tire if replacement is required.

Should any questions or problems arise while your tires are being inspected or replaced, please call Cooper Tire & Rubber Company's Consumer Relations at (800) 854-6288. We will attempt to be of service to you. In the event you believe we have failed to or are unable to replace your tire(s) without charge to you, within the sixty (60) day period described above, you may so notify the Secretary of Transportation at the following address: Administrator, National Highway Traffic Safety Administration, 1200 New Jersey Avenue, SE, Washington, DC 20590, or phone NHTSA's Vehicle Safety Hotline at 1-888-327-4236 (TTY 1-800-424-9153; or go to <http://www.safercar.gov>).

If you've had your tires replaced before you received this letter, you may be eligible to receive reimbursement for the cost of obtaining a pre-notification remedy of the problem associated with this recall. For more information contact the Consumer Relations department.

We regret this inconvenience, but are sure that you understand our interest in your safety and satisfaction with your tires. Please see your dealer immediately for free replacement of the recalled tires. Give this letter to them so that it can be returned to us for purposes of this recall.

Sincerely,



William N. G. Geaman, Jr.  
Manager, Consumer Quality Systems

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TO BE COMPLETED BY DEALER

Tires inspected and replaced \_\_\_\_\_  
(date)

Dealer stamp or name and address

Dealer: Please complete the above section: attach letter to the Tire and Tube Claim Form and return the Claim Form(s) and recalled tire(s) per our standard adjustment procedures.



MAIL ALL ADJUSTMENT  
PAPER WORK SEPARATELY TO:

COOPER TIRE  
CONSUMER RELATIONS  
PO BOX 550  
FINDLAY, OH 45839



**COOPERTIRES®**

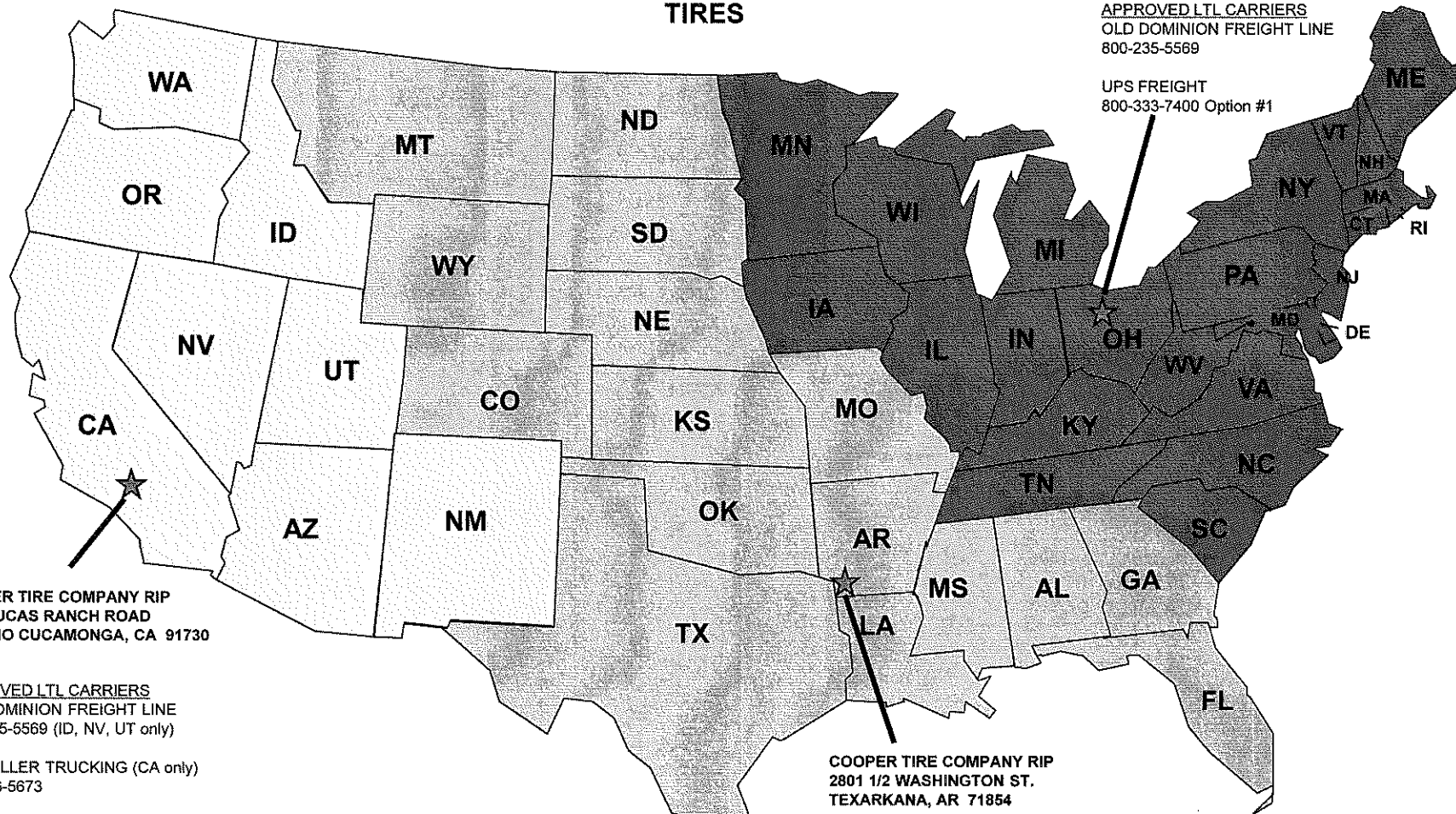
**REGIONAL INSPECTION POINTS AND  
REQUIRED CARRIERS FOR ADJUSTMENT  
TIRES**

OVER 1000 lbs. CAN BE SENT FREIGHT  
COLLECT- CHECK SCRAP RUBBER CLASS 50

COOPER TIRE COMPANY RIP  
800 WESTERN AVENUE  
FINDLAY, OH 45840

APPROVED LTL CARRIERS  
OLD DOMINION FREIGHT LINE  
800-235-5569

UPS FREIGHT  
800-333-7400 Option #1



COOPER TIRE COMPANY RIP  
9363 LUCAS RANCH ROAD  
RANCHO CUCAMONGA, CA 91730

APPROVED LTL CARRIERS  
OLD DOMINION FREIGHT LINE  
(800-235-5569 (ID, NV, UT only)

ROY MILLER TRUCKING (CA only)  
800-336-5673

USF REDDAWAY (OR, WA only)  
(800) 395-1360

UPS FREIGHT (AZ, NM only)  
800-333-7400 Option #1

COOPER TIRE COMPANY RIP  
2801 1/2 WASHINGTON ST.  
TEXARKANA, AR 71854

APPROVED LTL CARRIERS  
OLD DOMINION FREIGHT LINE  
800-235-5569

YELLOW FREIGHT (WY, NE only)  
800-610-6500



MANUFACTURER'S  
TIRE AND TUBE CLAIM

FROM:

NAME

STREET ADDRESS

CITY & STATE

FORM NO. 08-34 REV 12/11

CUSTOMER/DEALER  
NUMBER

CREDIT TO  
TO

DO NOT WRITE IN THE SPACE BELOW

CLAIM  
NO.

C 725709

IMPORTANT

Please mail claims to:  
The Cooper Tire Company  
Attn: Consumer Relations  
701 Lima Avenue  
Findlay, Ohio 45840

Please refer to your  
Dealer Adjustment Procedure  
manual for instructions on  
returning tires.

I/We hereby certify that the merchandise below described was not involved in any incident involving personal injury or property damage other than damage to such merchandise, that such merchandise is free and clear of all liens and that I/we will save the Manufacturer harmless from any claims or loss resulting from liens on the aforesaid merchandise.

ITEM	SIZE AND TYPE	D.O.T. / SERIAL NUMBER	COND. CODE	TREAD DEPTH 32NDS	REPL. PRICE	DATE ADJ.	NAME OF CONSUMER	ADDRESS OF CONSUMER (PLEASE PRINT)
1								
2								
3								
4								
5								
6								
7								
8								
9								
10								
11								
12								
13								
14								
15								

I hereby certify that I have made the adjustments listed above and that they have been accepted by the consumer. In handling these claims I have adjusted these items on the basis of (1) the original purchase price or (2) my actual current retail selling price at the time of adjustment.

DO NOT WRITE IN THE SPACE BELOW

DEALER SIGNATURE \_\_\_\_\_ DATE SHIPPED \_\_\_\_\_

(SEE BACK OF FORM FOR INSTRUCTIONS TO PROPERLY COMPLETE CLAIM FORM)  
ADJ. FILE

*Please Use Ball Point Pen. Even Heavy Pressure With Fingers Set Placed on Hard Surface*

## CLAIM INSTRUCTIONS

1. Fill in upper left-hand block.
2. Record size and type of item adjusted, using abbreviations.
3. Record complete D.O.T./Serial number of item adjusted (this will be 10 or 11 digits, beginning directly after the letters "D.O.T.").
4. Record appropriate condition code from list at right.
5. Record remaining tread depth.
6. Record replacement price charged customer.
7. Obtain customer's name, street address, city and state. Record date adjusted. Customer signature required for tubes.
8. Clearly mark tires or tubes in yellow crayon as follows (see example Figure 1):
  - A. Dealer name.
  - B. Mark over serial number with crayon to make clearly visible.
  - \*C. **TIRE CONDITION-CIRCLE AREA OF FAILURE** (a two-inch crayon mark near condition should also be indicated on the bead in case the condition does not show on outside of tire). Ride Complaints should be marked on tire as "O.R."
  - D. Write the claim number close to serial number using the last three digits of the claim number and the line item number - Example: If claim number is 54339 and the line number is #4, the number you would mark on the tire would be 339-4.
  - E. **CIRCLE THE AREA OF THE TREAD DEPTH MEASUREMENT.** (Use one 1" circle)
9. Place shipping label on tread of each tire.
10. Record date shipped. Remove dealer file copy for your records.
11. Attach any completed warranty validation tags to the claim forms. Each tag should be stapled to the form which lists the tire related to the tag. Do not attach tags to tires or return them with tires.
12. If you wish to have a specific item, or items, returned for any reason, you must notify **Cooper Tire Company** in writing. The notification should be attached to the claim forms and mailed with them to Cooper. Items requested will be returned direct to the dealer at the dealer's expense.
13. Mail top copy of completed manufacturer Claim Form to:
 

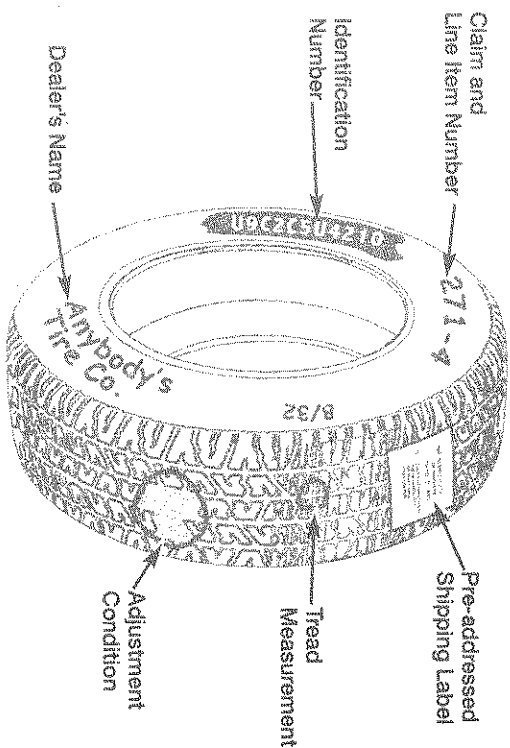
**The Cooper Tire Company**  
 Attn: Consumer Relations  
 701 Lima Avenue  
 Findlay, Ohio 45840
14. This form must be completed and correctly filled in and each line item MUST CONTAIN THE NAME OF THE CONSUMER before claim will be considered. FORM MUST ALSO BE SIGNED BY THE DEALER.

## TIRE CONDITION

CODE	DESCRIPTION
12	Open Splice
14	Out-of-Round or Ride Disturbance
17	Tread Cracking
32	Separation
93	Sidewall Cracking

MLG Mileage Warranty  
N/D New Defective

\* If the code is not listed for a particular condition, please be sure to mark the area on the tire and describe as best as possible.



### IMPORTANT

\*WHEN WE ARE UNABLE TO LOCATE AN ADJUSTABLE CONDITION, WE HAVE NO CHOICE BUT TO DISALLOW CREDIT.

Claims For Adjustments Will Be Rejected When The Claim Form Has Not Been Properly Completed

This is to certify that the herein-named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation.

# STRAIGHT BILL OF LADING

## ORIGINAL - NOT NEGOTIABLE

Shipper No. \_\_\_\_\_

Carrier No. \_\_\_\_\_

Date \_\_\_\_\_

(Name of Carrier)		(SCAC)	
TO: Consignee <b>Cooper Tire &amp; Rubber Co.</b>		FROM: Shipper	
On Collect on Delivery shipments, the letters "COD" must appear before consignee's name - - or as otherwise provided in Item 430, Sec. 1			
Street		Street	
Destination		Zip Code	
Origin		Zip Code	
Vehicle Number		U.S. DOT Hazmat Reg. Number	

No. Shipping Units	* HM	Kind of Packaging, Description of Articles, Special Marks and Exceptions	Weight (Subject to Correction)	RATE	CHARGES
		<b>Scrap Rubber Tires 194200 - Class 50</b>		<b>Class 50</b>	
		<b>The actual value per pound does not exceed \$1.00</b>			
		<b>Render Freight Bill to Cooper Tire &amp; Rubber Company,</b>			
		<b>P.O. Box 550, Findlay, OH 45839</b>			

REMIT C.O.D. TO: ADDRESS	<b>COD</b> Amt: \$	C.O.D. FEE: PREPAID <input type="checkbox"/> COLLECT <input type="checkbox"/> \$
Note - Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property. The agreed or declared value of the property is hereby specifically stated by the shipper to be not exceeding \$ _____ per _____	(Signature of Consignor)	TOTAL CHARGES: \$
		<b>FREIGHT CHARGES</b> FREIGHT PREPAID <input type="checkbox"/> Check box if charges are except when box at right is checked COLLECT <input checked="" type="checkbox"/> XXX to be collect

RECEIVED, subject to the classifications and lawfully filed tariffs in effect on the date of the issue of this Bill of Lading, the property described above in apparent good order, except as noted (contents and condition of contents of packages unknown), marked, consigned, and destined as indicated above which said carrier (the word carrier being understood throughout this contract as meaning any person or corporation in possession of the property under the contract) agrees to carry to its usual place of delivery at said destination, if on its route, otherwise to deliver to another carrier on the route to said destination. It is mutually agreed as to each carrier of all or any of, said property over all or any portion of said route to destination and as to each party at any time interested in all or any of said property, that every service to be performed hereunder shall be subject to all the bill of lading terms and conditions in the governing classification on the date of shipment.

Shipper hereby certifies that he is familiar with all the bill of lading terms and conditions in the governing classification and the said terms and conditions are hereby agreed to by the shipper and accepted for himself and his assigns.

SHIPPER	CARRIER
PER	PER
EMERGENCY RESPONSE TELEPHONE NUMBER	DATE

Monitored at all times the Hazardous Material is in transportation including storage incidental to transportation (§172.604)

\* Mark with an "X" to designate Hazardous Material as defined in the Department of Transportation Regulations governing the transportation of hazardous materials. The use of this column is an optional method for identifying hazardous materials on bills of lading per Section 172.201(a) (1) (ii) of Title 49, code of Federal Regulations. Also, when shipping hazardous materials, the shipper's certification statement prescribed in Section 172.204(a) of the Federal Regulation must be indicated on the bill of lading, unless a specific exception from this requirement is provided in the Regulations for a particular material.

PRINTED IN U.S.A.

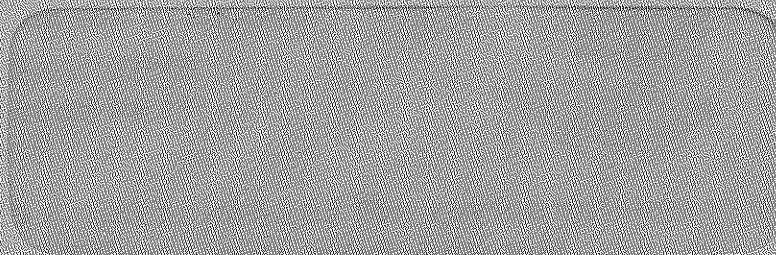
REV. 4/12

1



COOPER TIRE & RUBBER COMPANY  
701 Lima Avenue • Findlay, OH 45840

**IMPORTANT: PACKING SLIP ENCLOSED**



**BILL OF LADING NO.** \_\_\_\_\_

**TRAILER NO.** \_\_\_\_\_

**Packing Slip enclosed must be delivered with the first portion of shipment.  
Compliance will expedite unloading.**

13-71 2/11