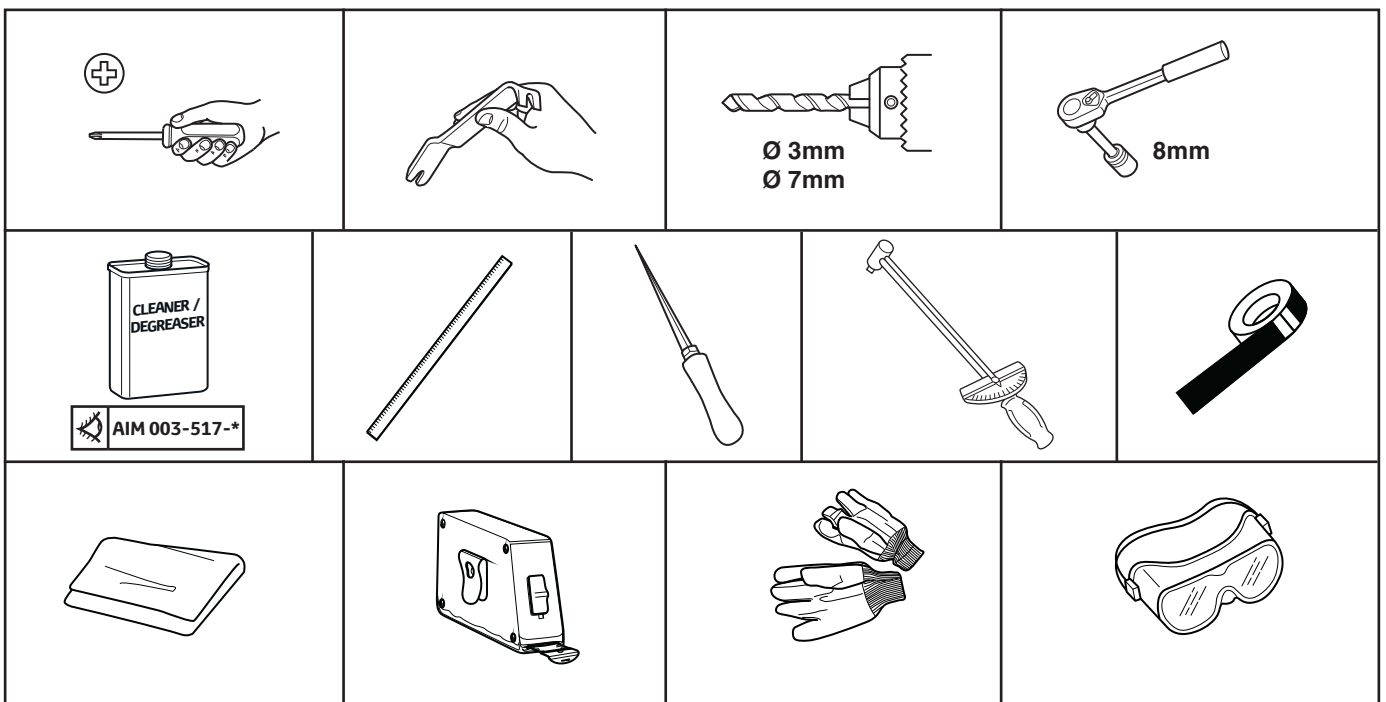
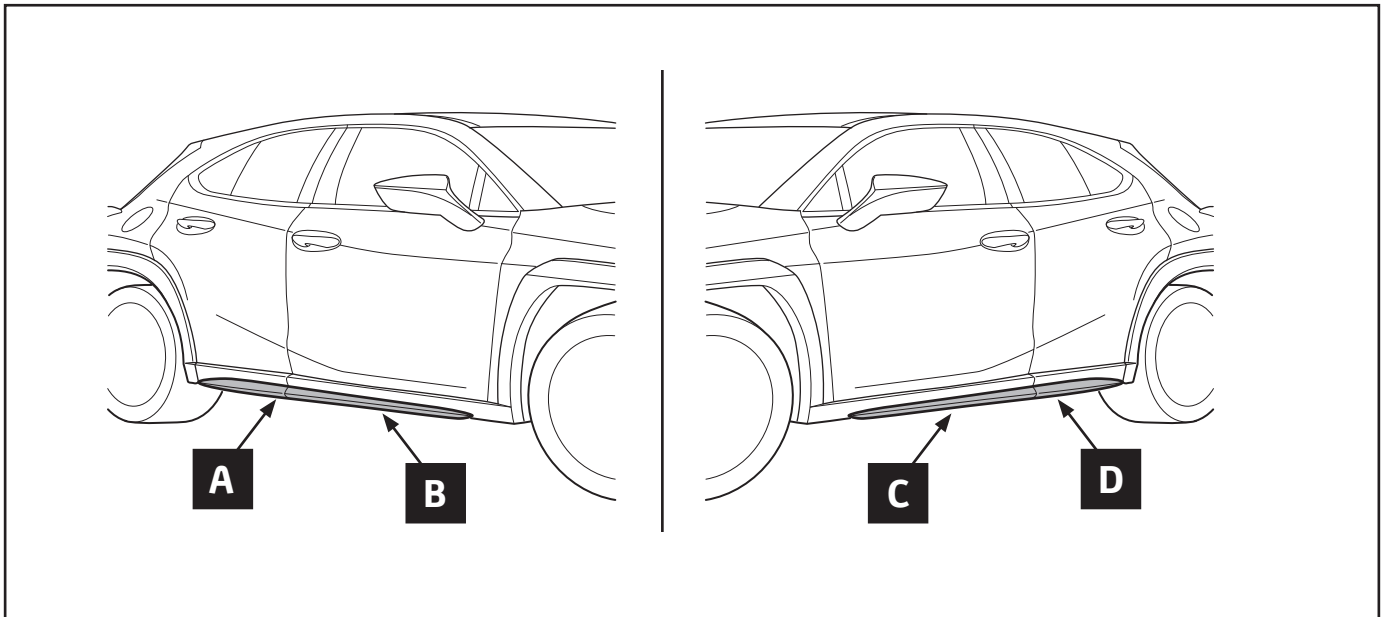
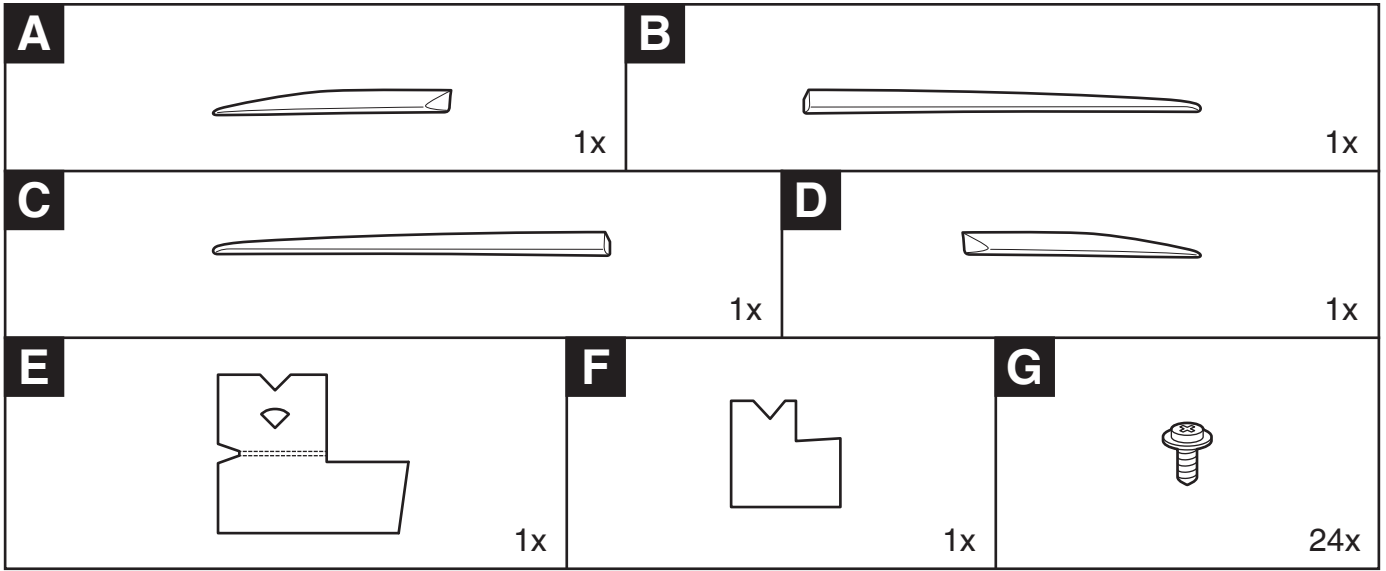


Side Skirt INSTALLATION INSTRUCTIONS UX

Model year 2018/11, 2020/08 (UX300e)
Vehicle code MZA*1**-AWXBBW
KMA10*-AWDBSW
Part number 08150-76830

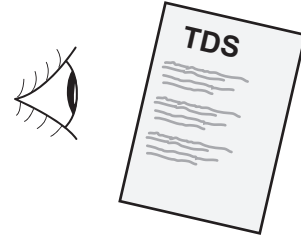
Revision Record

Rev. No.	Date	Page	Step	Remarks
①	28.03.19	6	6, 7	Steps deleted
①	28.03.19	7	8	Installation steps updated
①	28.03.19	10, 11	18, 19	Steps deleted
①	28.03.19	11	20	Installation steps updated
①	28.03.19	15, 16	Check sheet	Checks removed
②	07.04.20	1, 15		Date and Vehicle Code added



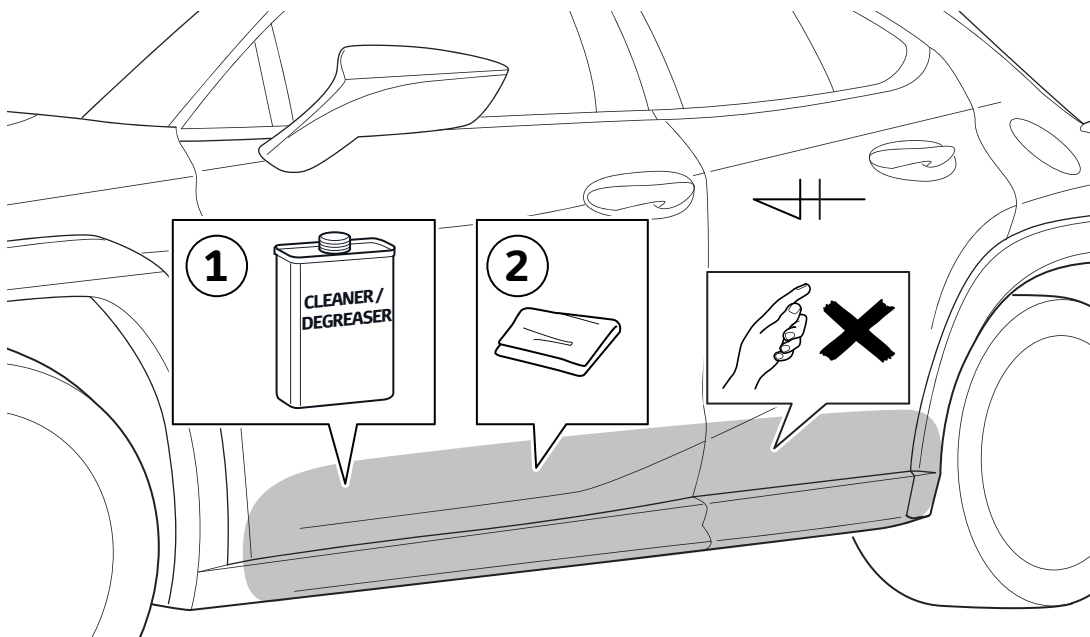
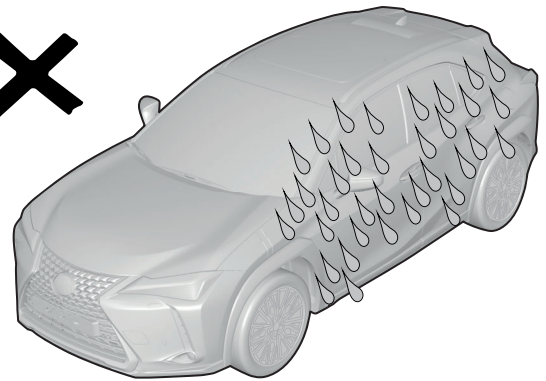
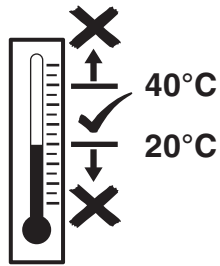
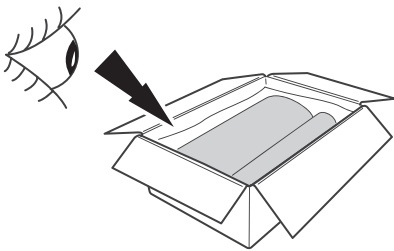
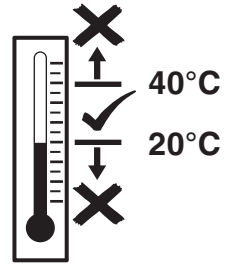


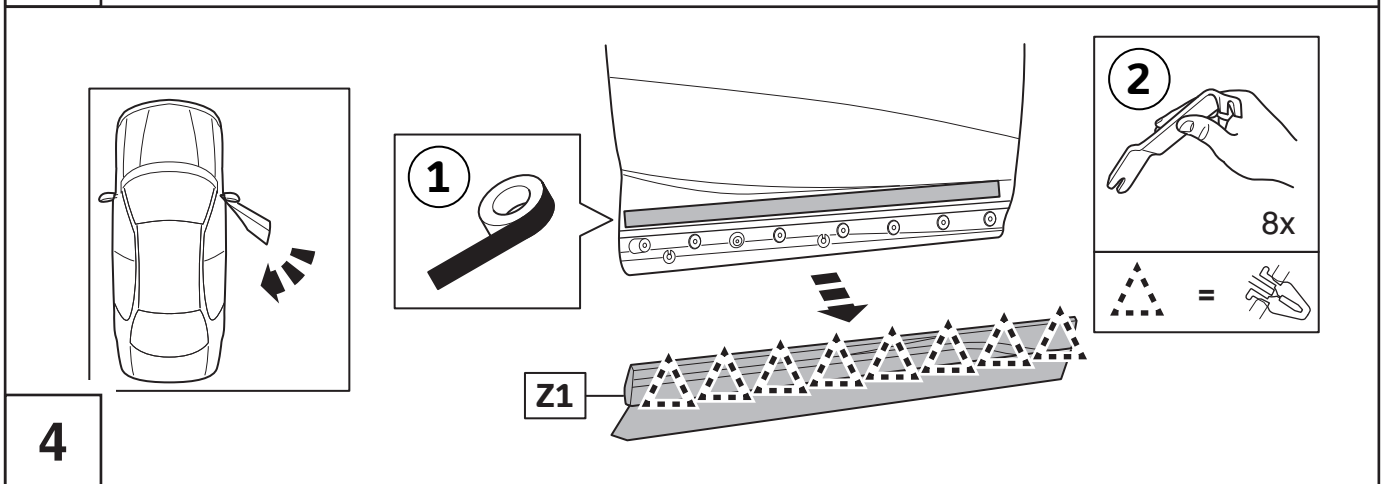
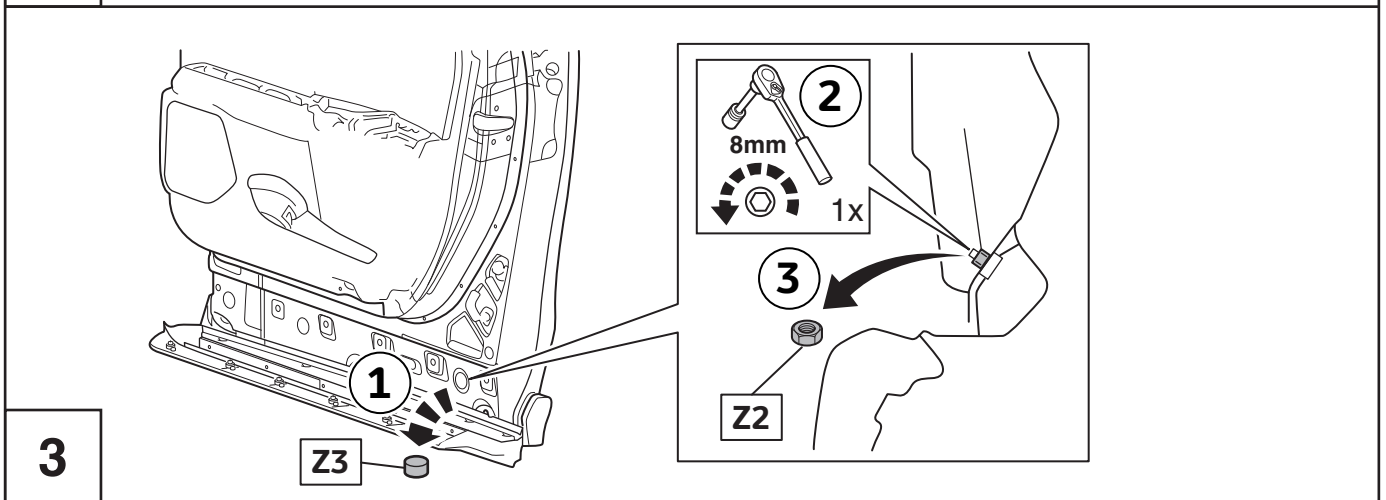
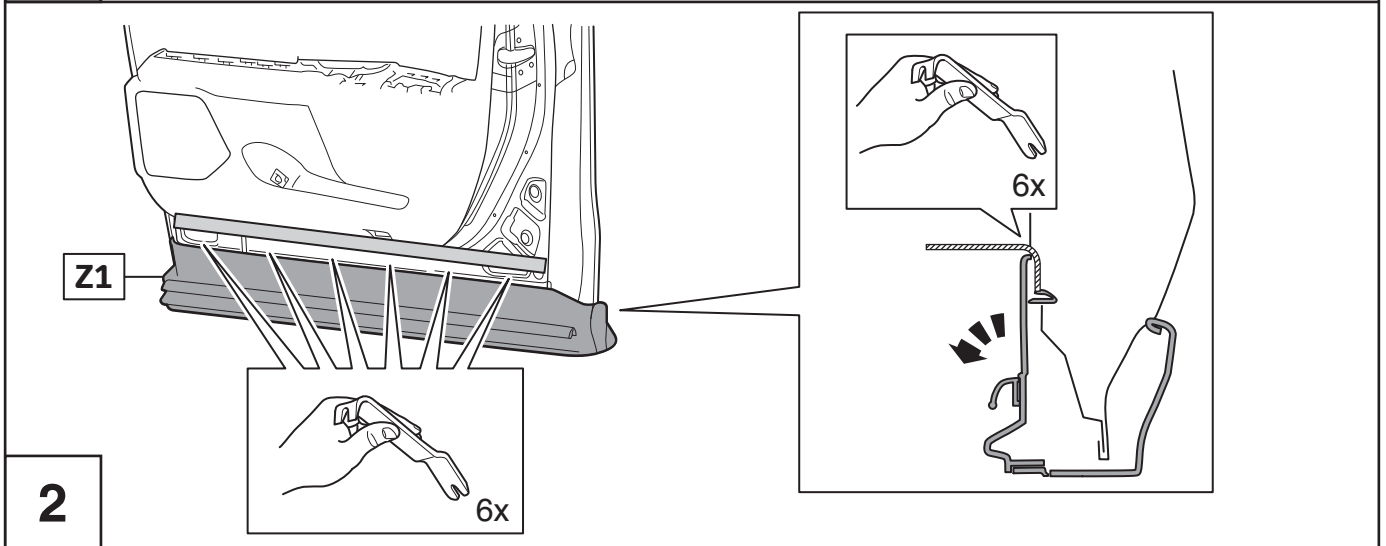
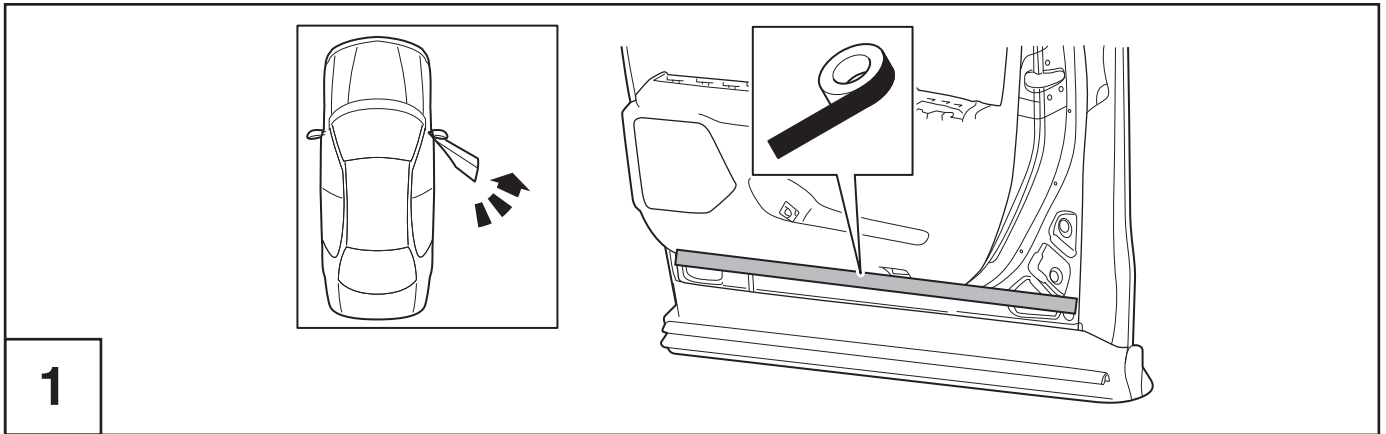
Material Safety Data Sheet

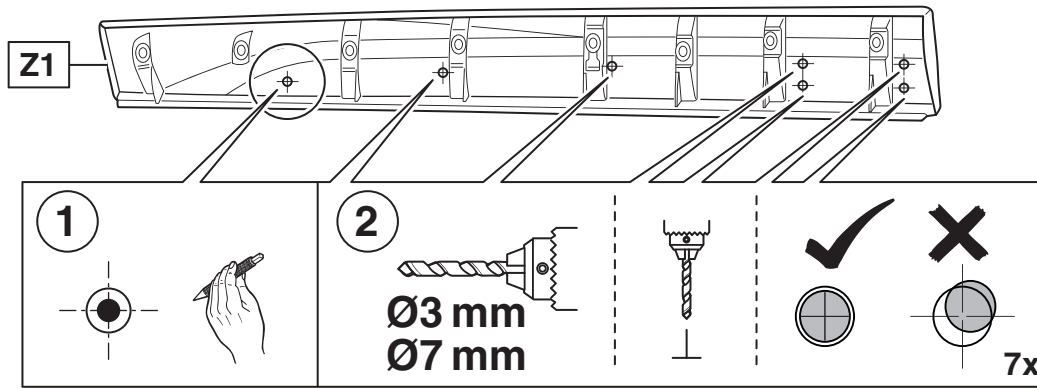


Technical Data Sheet

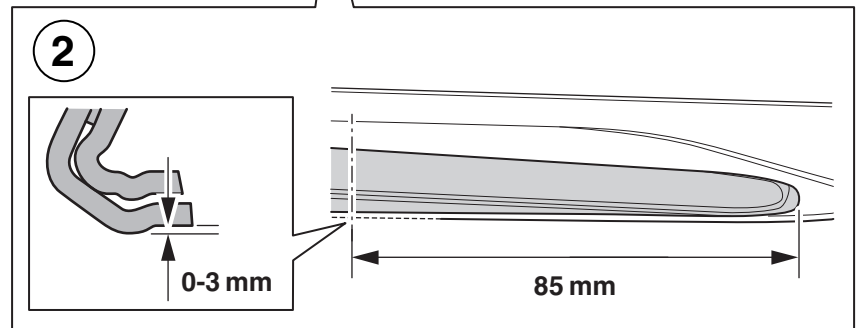
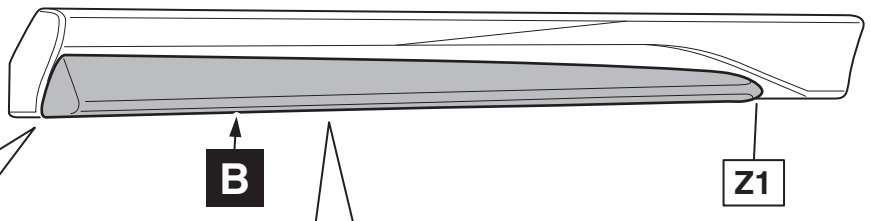
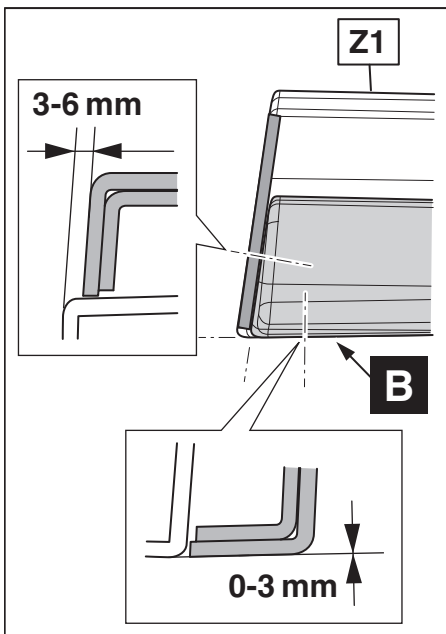
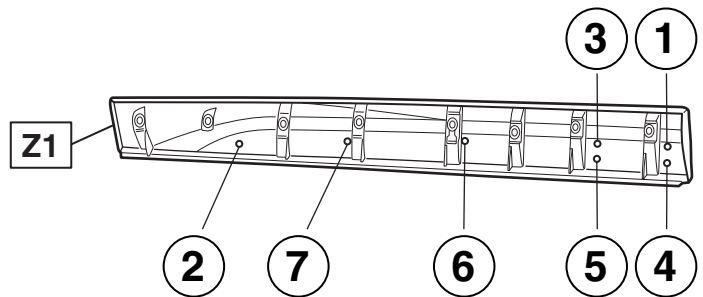
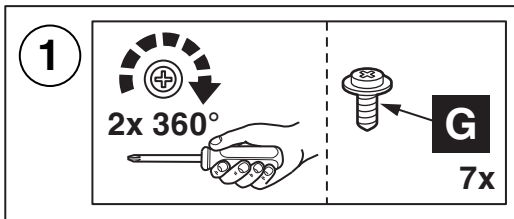
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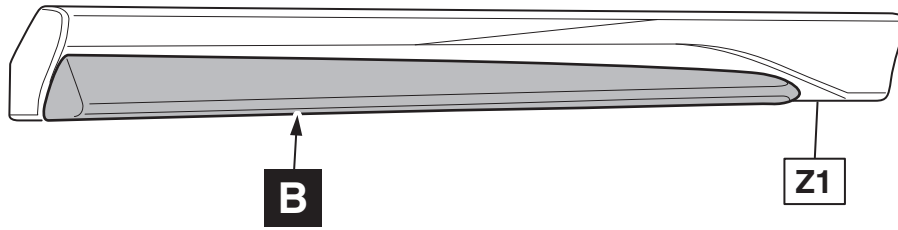
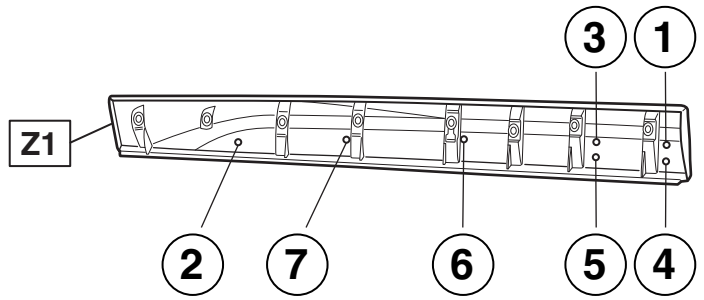
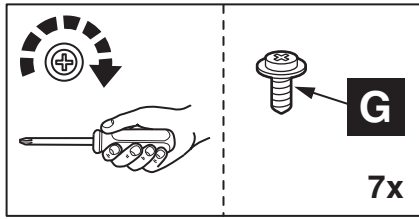




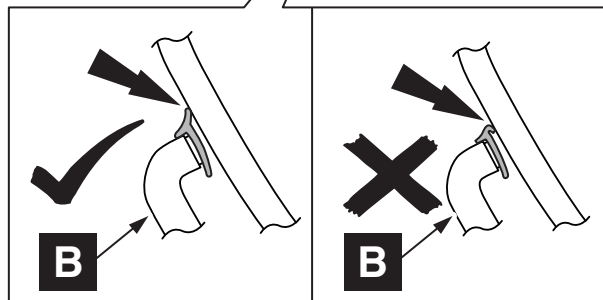
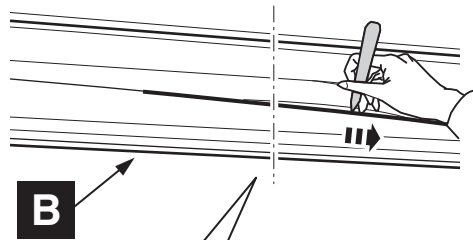
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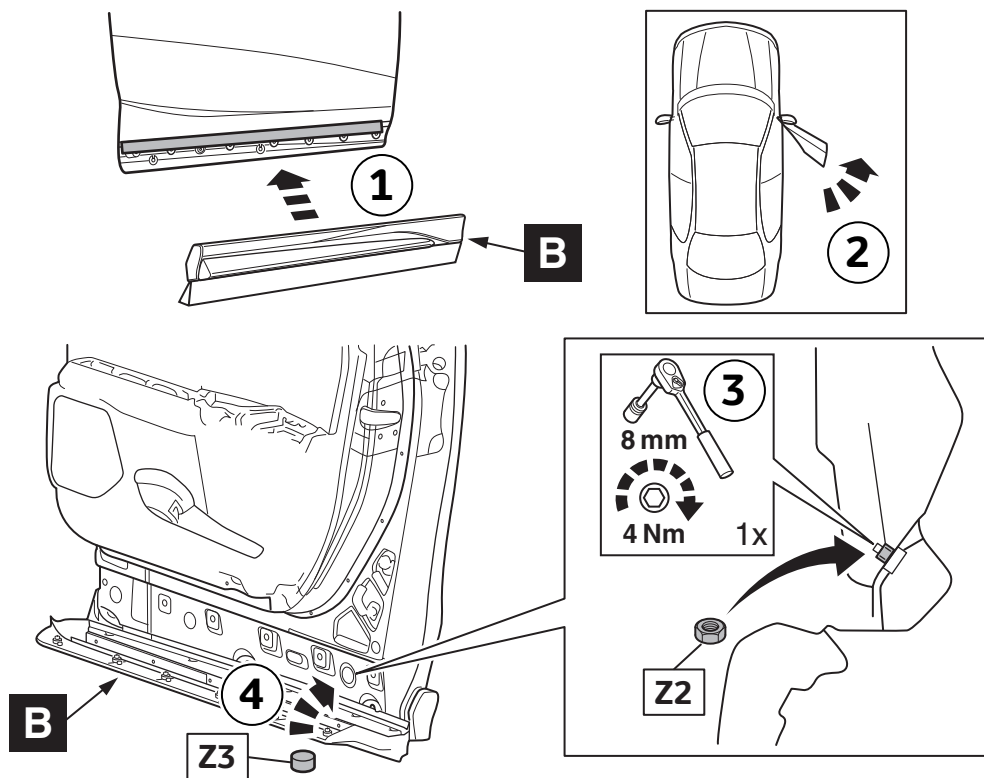
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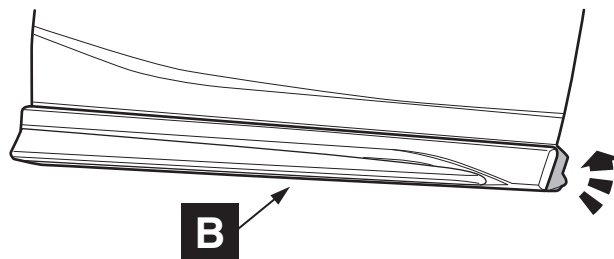
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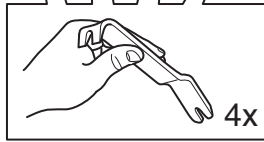
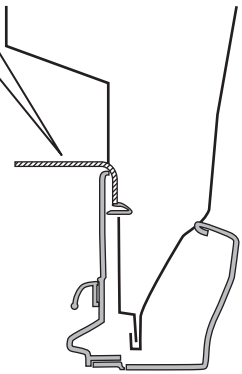
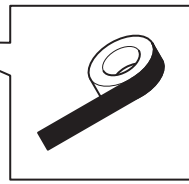
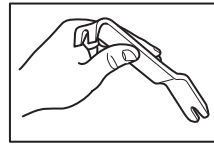
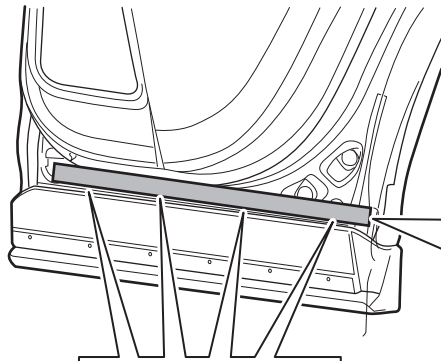
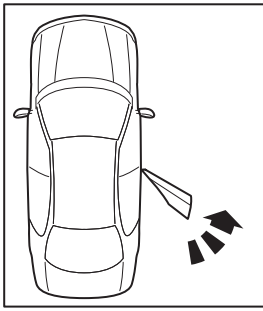
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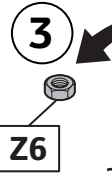
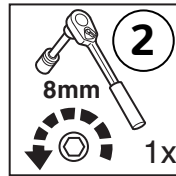
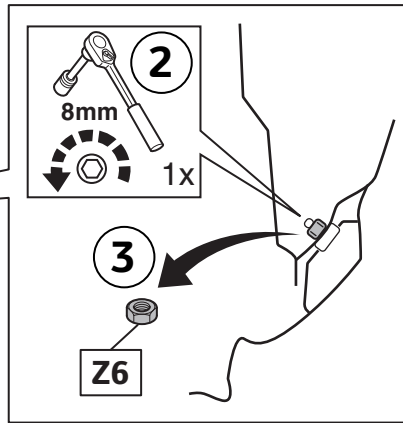
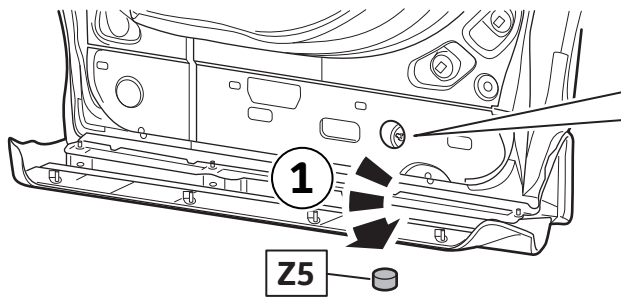
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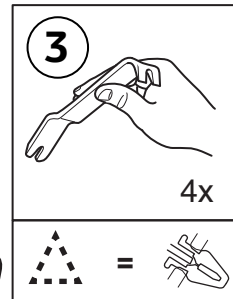
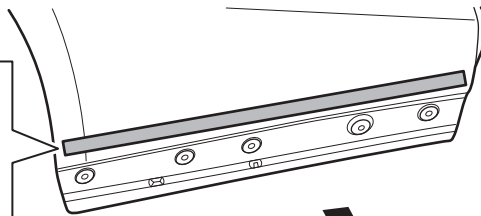
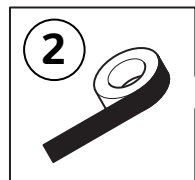
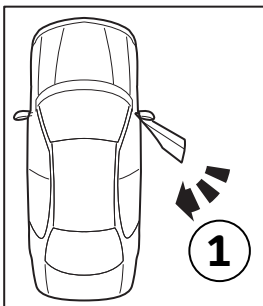
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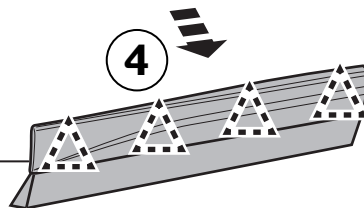
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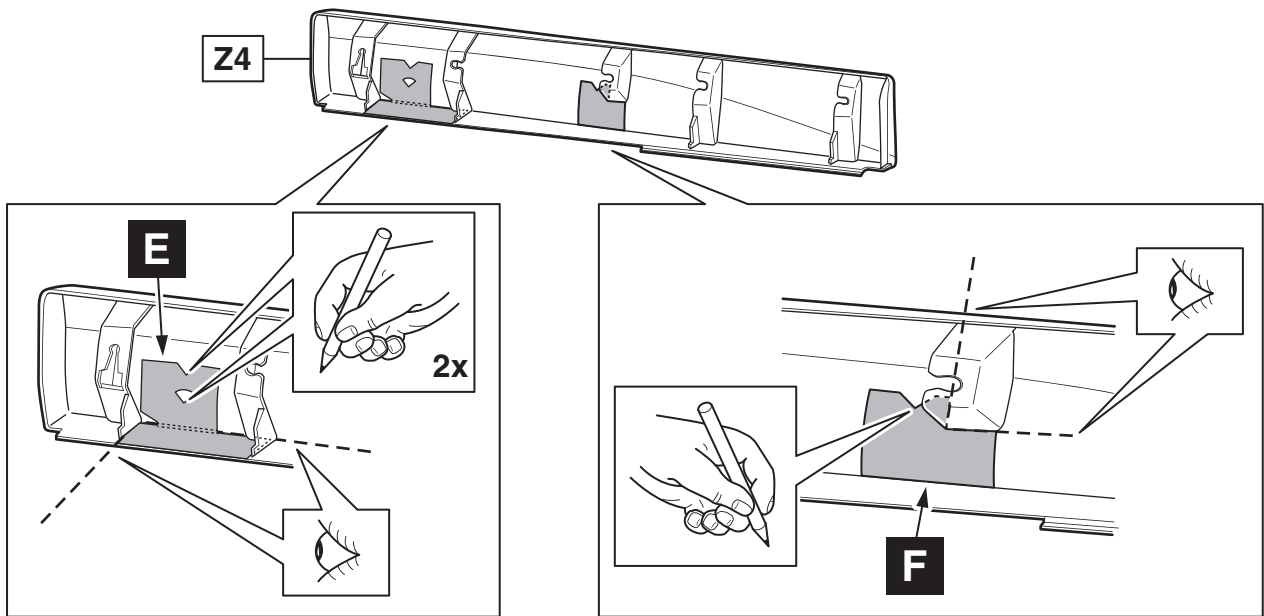
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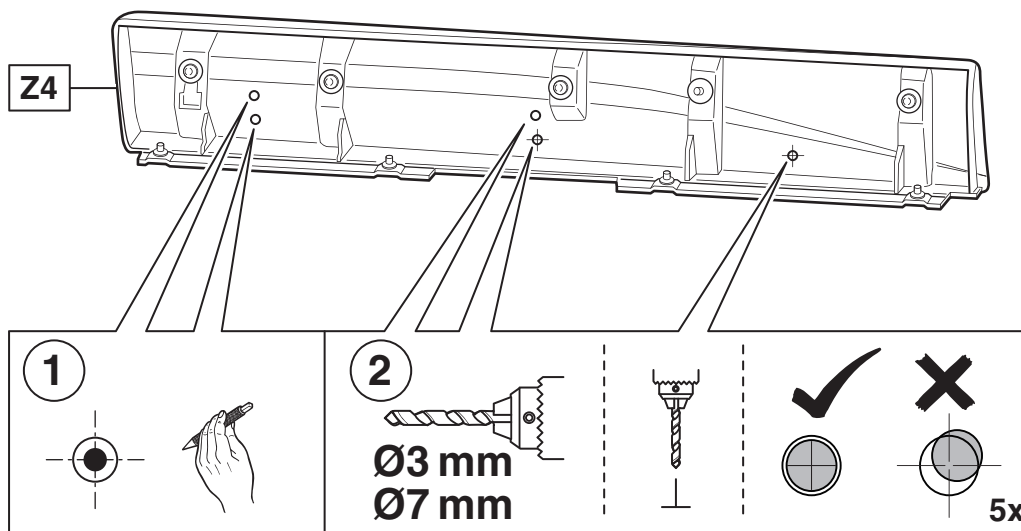
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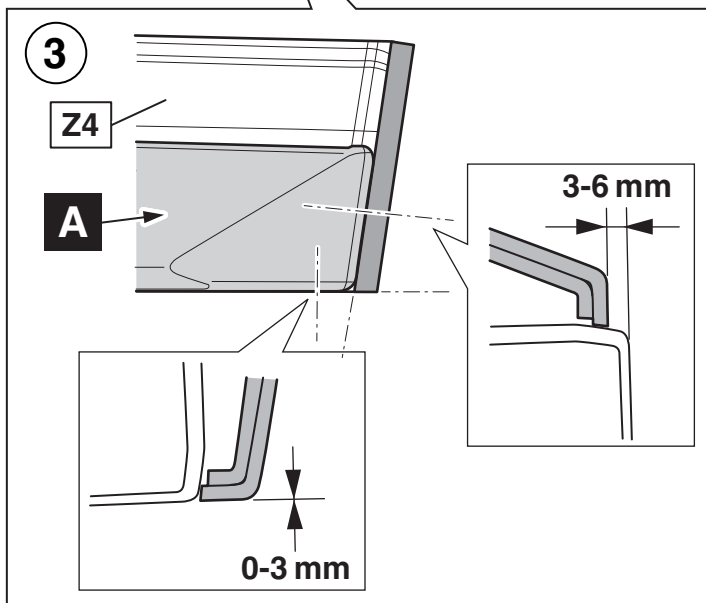
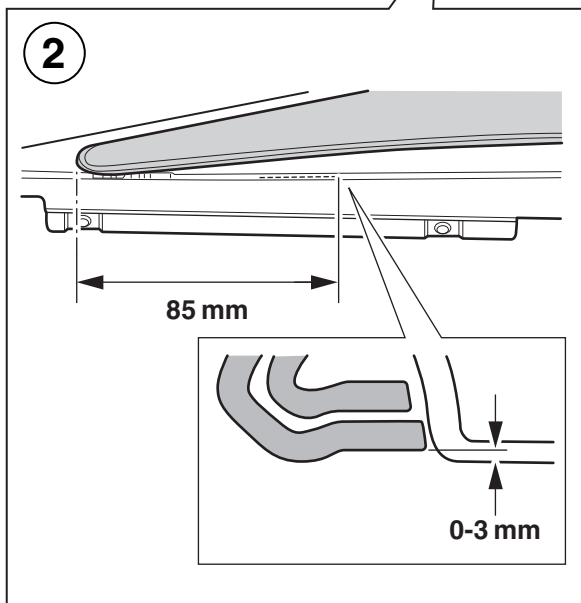
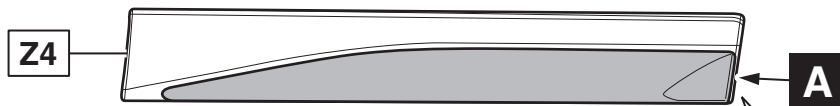
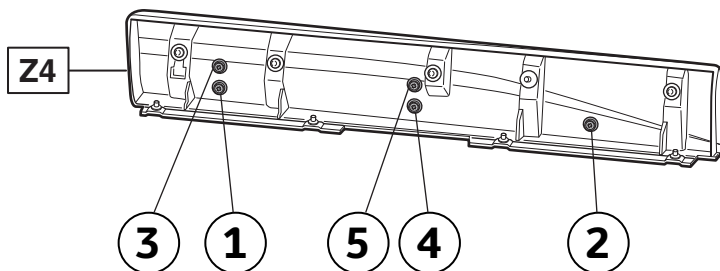
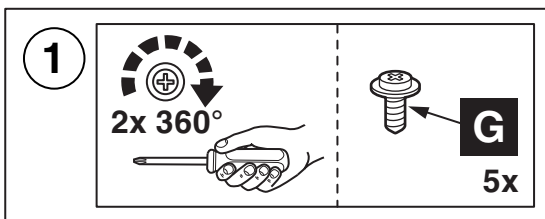
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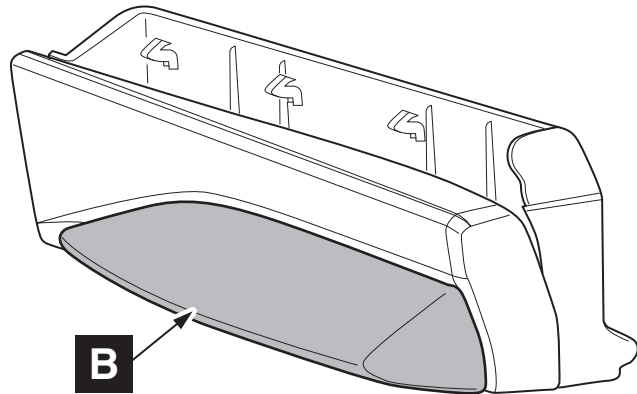
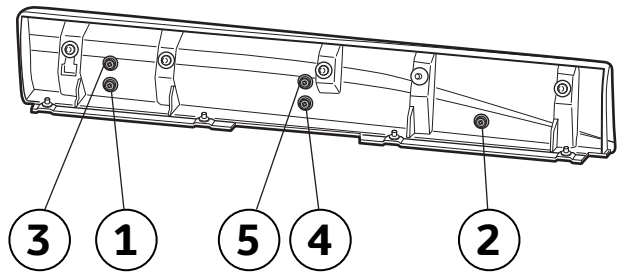
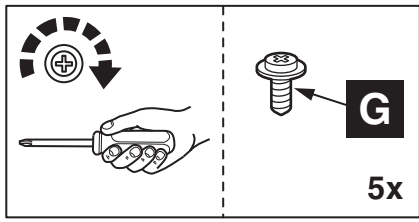


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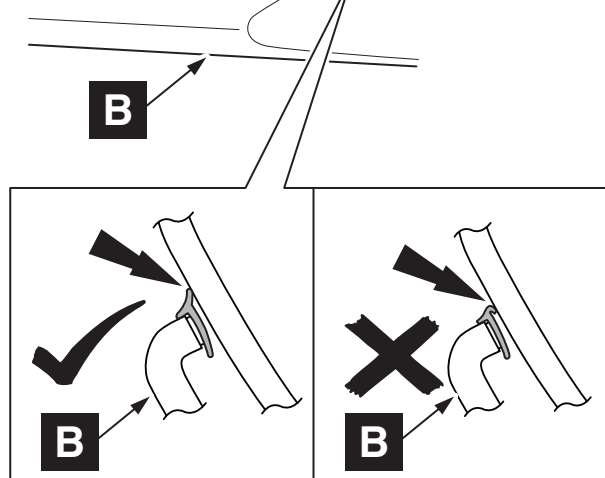


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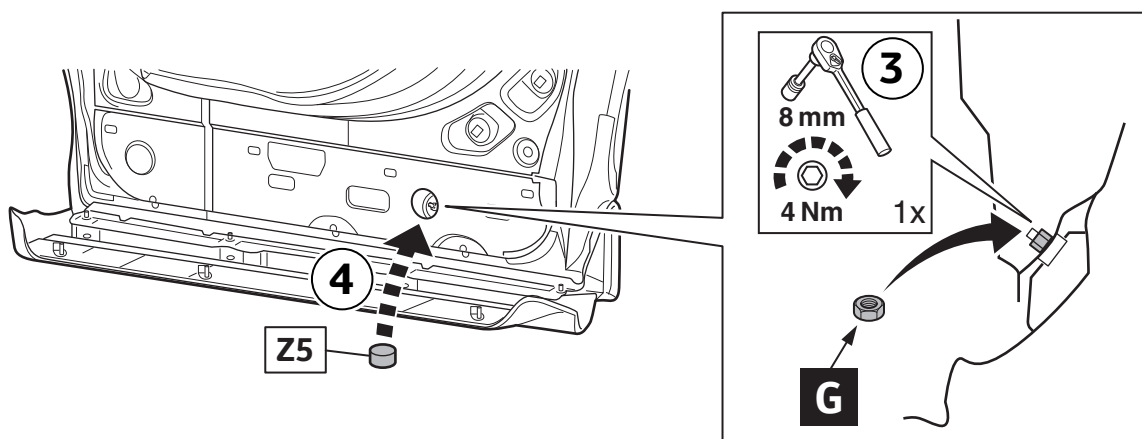
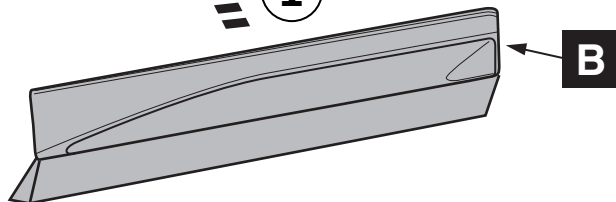
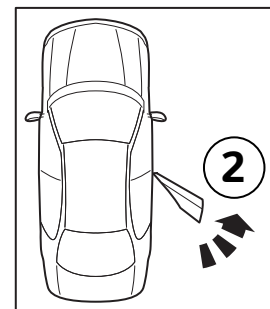
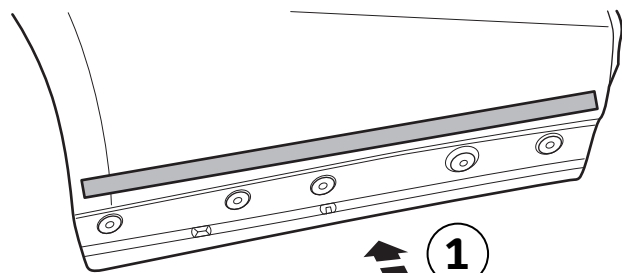




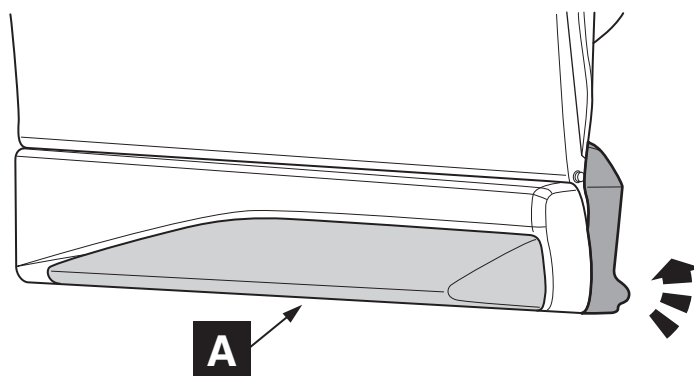
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18



19



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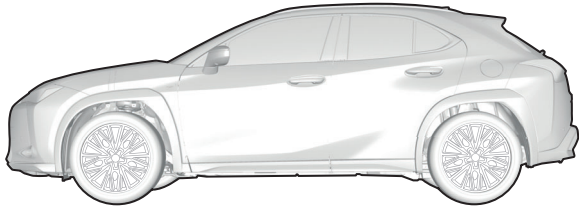


Fig.1→Fig.20

LHS
C D

=

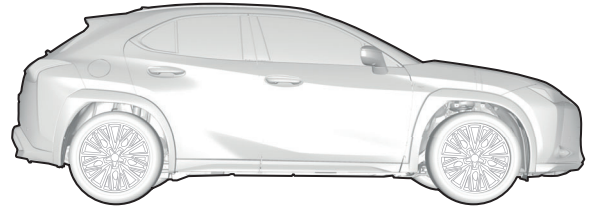
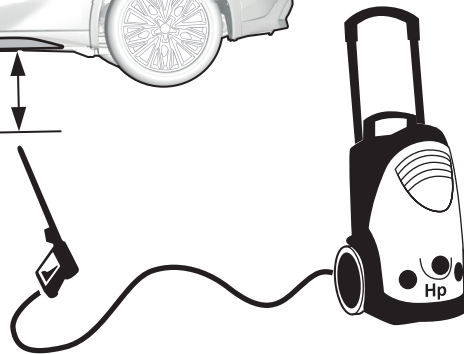
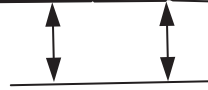
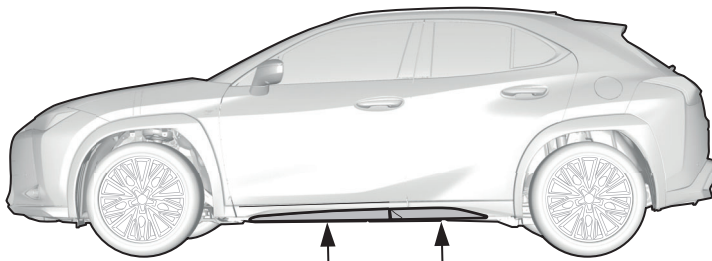


Fig.1→Fig.20

RHS
A B

21



> 50 cm

CHECK SHEET

Sheet 1 of 2



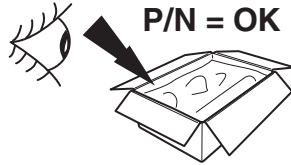
Model / Year Lexus UX

Side Skirt

2018/11, 2020/08 (UX300e)

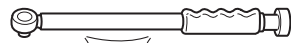
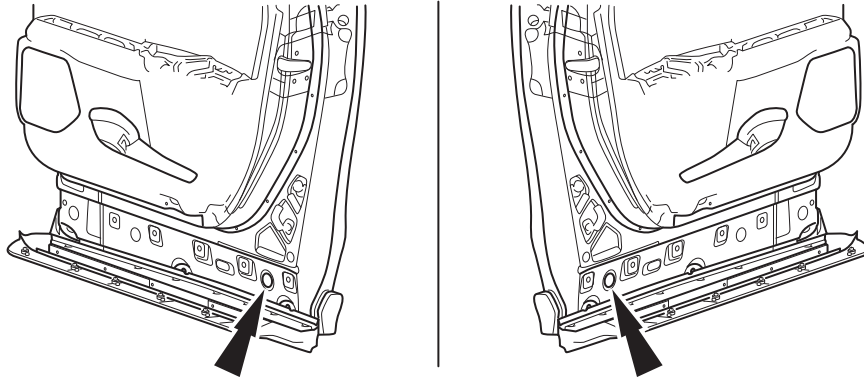
VIN n°

DURING INSTALLATION



1

AFTER INSTALLATION



CLICK

Serial Number

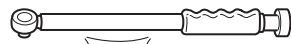
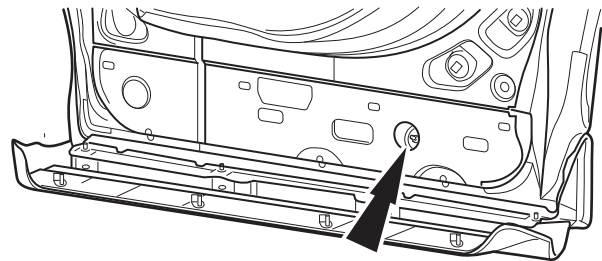
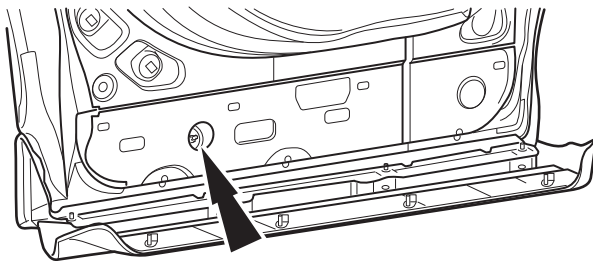
LHS

4 Nm
1x

RHS

4 Nm
1x

1



CLICK

Serial Number

LHS

4 Nm
1x

RHS

4 Nm
1x

2

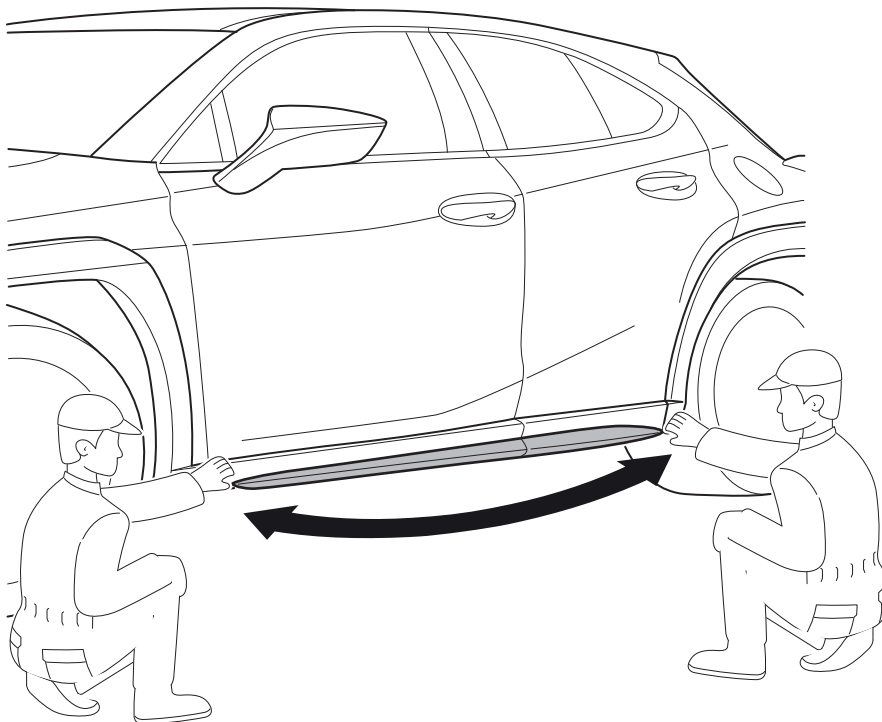
Installation Date:


Technician Name & Signature:

Stamp:

CHECK SHEET

Sheet 2 of 2



 = OK	
LHS	RHS
<input type="checkbox"/>	<input type="checkbox"/>

3

Installation Date:

. . / . . /

Technician Name & Signature:

Stamp:

