



EXPRESSION OF INTEREST: AA APPROVED REPAIRER

TRADING NAME:	
YEARS OF OWNING THIS BUSINESS:	
STREET ADDRESS & PREMISES TO BE APPROVED:	
POSTAL ADDRESS:	
EMAIL ADDRESS:	WEB ADDRESS:
PHONE NUMBER:	Cell PHONE:
MANAGER:	
SERVICE MANAGER:	
NAME OF COMPANY / PROPRIETOR / TRUST IF DIFFERENT FROM TRADING NAME:	
ADDRESS:	
PUBLIC LIABILITY INSURER:	
PUBLIC LIABILITY POLICY NUMBER:	
COVER:	EXCESS:
OIL FRANCHISE:	
BATTERY STOCK onsite and Supplier	
VEHICLE FRANCHISE:	
OTHER FRANCHISES: (Motoring Groups)	
LABOUR RATE PER HOUR:	
TECHNICIANS: & Qualification	APPRENTICES:
CUSTOMER SERVICE STAFF:	SPARE PARTS STAFF:
EFTPOS TERMINAL IN WORKSHOP? (Check the Terminal Type)	YES / NO

BUSINESS REFERENCES:

Please supply the names and addresses of 4 firms that you authorise the AA to approach for a reference.

Name	Address

Bank _____ Branch _____ Telephone _____

Will you permit the AA to select at random from your records the names of customers in order that enquiries can be made about your service and pricing policies? **YES / NO**

Do you have the equipment and facilities to carry out the following completely?

	YES	NO	OUT WORKED
General Automotive Servicing			
General Automotive Repair			
General Automotive Electrical Repair			
Specialist Automotive Electrical Repair			
Computer Scanning and repair	NUMBER	Scan Tools	
Specialist brake repairs			
General brake repair			
Specialist Transmission repair Automatic only			
Specialist Transmission /diff repair all			
General Transmission and driveline repair			
General Diff repair			
EV specialist repair			
EV and Hybrid general repair			
Specialist engine overhaul			
General engine overhaul			
Air Conditioning servicing and repair			
Specialist power steering and hydraulic repairs			
General power steering servicing & repairs			
Specialist fuel injection			
Diesel / petrol injection repair / overhaul			
European vehicle repairs experience			
W.O.F.			
C.O.F			
Panel and rust repair			
CNG, LPG, servicing, repairs, certificates			
Tyre sale fitting and repair			
Wheel balance and alignment			
Vehicle breakdown assistance			
Onsite tow truck			
Loan or rental cars when available			
Incorrect fuel drain			
Removal of AD Blue in fuel tank			
Lockup yard and or key drop box			
4x4 and larger vehicle repair			
After Hours contact			

OTHER FACILITIES OR COMMENTS:

I have read this completed application form and state that the particulars are complete and true. I have given this information to the AA to enable it to decide whether or not to register me as an AA Approved Repairer. I authorise the AA to make any enquiries necessary about me from the referees named or from any other source. I hereby make application as an AA Approved Repairer in accordance with the terms and conditions relating to such an appointment.

SIGNATURE OF APPLICANT: _____ **DATE:** _____

Note: Separate applications are required in respect of each branch for which appointment is sought.

Please forward completed applications to: AA Approved Repair Network - Automobile Association- PO Box 5 Auckland or email aaar@aa.co.nz