

ROADSIDE SERVICE REIMBURSEMENT

Claim Form & Expense Template

1. CLAIMANT INFORMATION

FULL NAME

MEMBERSHIP / POLICY NUMBER

ADDRESS

PHONE NUMBER

EMAIL ADDRESS

2. VEHICLE INFORMATION

YEAR

MAKE

MODEL

LICENSE PLATE NUMBER

VEHICLE IDENTIFICATION NUMBER (VIN)

3. INCIDENT DETAILS

DATE OF INCIDENT

TIME OF INCIDENT

LOCATION OF INCIDENT (CITY, STATE, OR GPS)

TYPE OF SERVICE RENDERED

- Towing
- Flat Tire Change
- Battery Jump-start
- Lockout Service
- Fuel Delivery

