

## **CAA Manitoba Road Service Reimbursement Claim Form**

## Eligibility Requirements

While CAA Manitoba strives to be available to always service its Members, there are situations when 3<sup>rd</sup> party services are required or recommended. In these situations, Members must complete the following claim form for reimbursement consideration.

Please note, before you submit a claim, review the following criteria, and ensure you have all information and documentation requested to expedite the claim process. Any mandatory missing information may result in a delay and/or denial of your claim.

To be eligible for reimbursement consideration, Members must:

- Contact and be advised by CAA MB to proceed with 3<sup>rd</sup> party service.
- Have an active membership at the time of 3<sup>rd</sup> party service (reimbursement will not be considered
  if a membership was purchased after a road service event whereby 3<sup>rd</sup> party services were
  utilized).
- Have at least one service call available for use at the date and time of the road service event.
- Submit their claim within 60 days of service.
- Provide <u>all</u> mandatory information and supporting documentation requested on the claim form (including original itemized receipts non-itemized receipts will not be considered).
- Claims and accompanying documentation must bear the Member's name.

For complete details on claim reimbursement eligibility, please review our <u>Membership Terms and</u> Conditions.

## **Exclusions**

The following circumstances are excluded from reimbursement:

- Service provided for non-members
- · Police-ordered service for a legal infraction
- Accidents with a Manitoba Public Insurance (M.P.I.) claim

Member Details					
First Name	Last Name	Membership Number (16-digits) 620 275			
Address	Postal Code	City/Province			
Home Phone Number	Cell/Work Phone Number	Email Address			
Vehicle Information					
Year	Make	Model	License Plate		



FACILITY / SERVICE DETAILS					
Name of Facility Used		Facility Phone #	Date of Service (YY/MM/DD)		
Time of Service (a.m./p.m.) Breakdo	own Location/Address		City & Province/State		
Vehicle location at time of service:					
Highway ☐ Street ☐ Parking Lot ☐ Driveway ☐ Underground ☐ Other ☐					
If other, please specify:					
			Total amount paid for		
Yes No D	A/AAA from? service including taxes (\$)				
Type of service that was required:	Type of convice that was required:				
Tow ☐ Boost/Start ☐ Vehicle Lockout ☐ Fuel ☐ Stuck/Extrication ☐ Other ☐					
If other, please specify:					
Tow Destination (complete if service required was tow):		Tow Distance:			
		KM 🗖 MI 🗖			
Police Ordered Tow?	If yes, why was the vehicle ordered moved by the police?				
Yes ☐ No ☐	Accident □ Blocking Live Lane □ Safety/Bad Location □				
	Legal Infraction □ N/A □				
	-				
If the need for service was because	If yes, was the M.P.I. claim filed?				
of an accident, was M.P.I. notified?	Yes 🗖 No 🗖				
Yes No					
I understand that reimbursement v Manitoba Emergency Road Servic					
Signature					
Date (YY MM DD)					