



Repair Facility Information Form

Business Name: _____

Street/Shipping Address: _____

City: _____

State: _____

Zip: _____

Email address: _____

Work You Perform At Your Shop (Please check all that apply):

- | | |
|------------------------|--------------|
| AC/Heat | Ford |
| Back Up Camera/Monitor | Freightliner |
| Body | Isuzu |
| Decals | GMC |
| Sliding Doors | Navistar |
| Roll Up Doors | Mercedes |
| Electrical | Dodge |
| Truck Security Systems | |
| Keyless Entry | |
| Liftgate | |
| Paint | |
| Windshield Wipers | |
| Door Ajar Systems | |
| Structural | |
| Water Leaks | |

Other: Please specify _____

Labor Rate: \$ _____ Per Hour

We are interested in being listed as a Utilmaster Warranty Facility.
We have enclosed a current (signed & dated 2017) W9 Form