

Roadside Assistance Indemnity form

Incident no:

Date:

Service provider's trading name (Print):

Service technician's name (Print):

Customer's name:

Customer's license no: License expiry date:

Vehicle make & model:

Registration no: Odometer:

Vehicle destination

Dealership/Repairer:

Address:

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.....

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Customer to initial

Customer to initial

1. I am either the owner, or I am authorised by the owner of the vehicle to accept Roadside Assistance services.
2. I accept that any repairs will be of a temporary nature only designed to mobilise the vehicle. I understand that after all temporary repairs or battery replacement I should seek advice from a franchised dealer.
3. In the case of a forced entry, I confirm that I have expressly asked or approved you to forcefully enter the vehicle and that all resulting damage is my sole responsibility.
4. I accept that if the vehicle is to be towed, I will remove all items of value from the vehicle. The loss or damage of such items is my sole responsibility.

Part 2 – Vehicle condition report

Items with vehicle

Keys Y N

Hubcaps Y N

Tools Y N

Aerial Y N

Tow hooks Y N

Locknut Key Y N

Inspection conditions

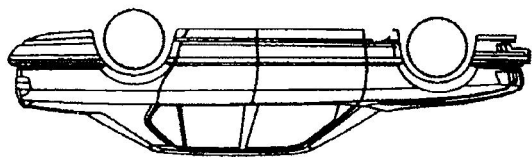
Day Night

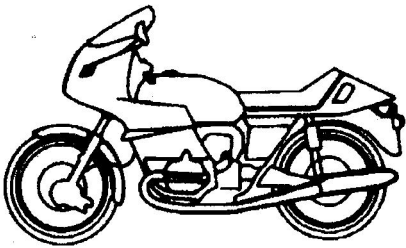
Wet Dry

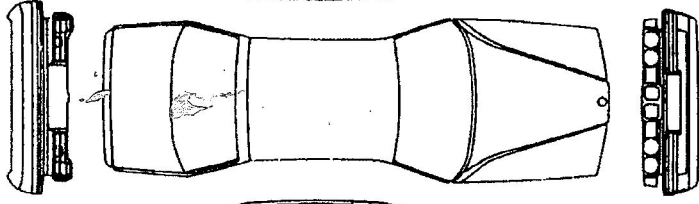
Clean Soiled

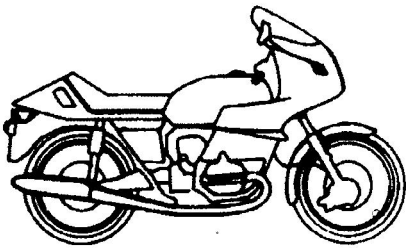
Damage type

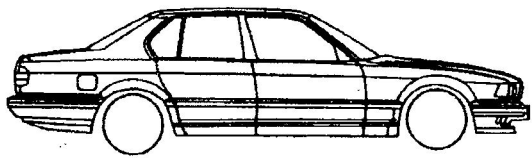
X = Scratches/dents











As the driver of the vehicle I do confirm that I have read and understood this document and have authorised you to either carry out any temporary repairs to mobilise the vehicle or tow the vehicle if the vehicle cannot be mobilised.

Customer's signature:

Service provider's signature:

DRIVER TO KEEP WHITE COPY; RECEIVER TO KEEP PINK COPY;
SERVICE PROVIDER TO KEEP YELLOW COPY

Receiver's signature: