



PREMIER

AAA Mid-Atlantic

ATTN: MEMBER RELATIONS DEPT.

P.O. Box 6032

Newark, DE 19714

800-763-8200 ext. 69074

CLUB REIMBURSEMENT POLICY

For emergency service provided by non-AAA facilities when AAA service is not available, please submit your request for reimbursement consideration under the terms of the membership up to the amount it would have cost AAA to provide service under similar circumstances. Except on limited access roads, Members must make every effort to secure AAA service first. **To submit for reimbursement consideration please submit the original receipt within 60 days of the date of service. Please allow 3-5 weeks for processing**

ROADSIDE ASSISTANCE REIMBURSEMENT REQUEST

| | | | | |
|--|------|---------------------------------|-----------------|----------------|
| Was a Member in the vehicle at the time of breakdown | | Yes | No | Membership No. |
| Member's Name | | 438-212- | | |
| Mailing Address | | Day/Evening Phone No. | | |
| | | E-mail Address | | |
| Vehicle Driver | | Vehicle Type | | |
| | | Passenger Van Truck RV | | |
| Service Date | Time | a.m. | Year/Make/Model | |
| | | p.m. | | |

ACCIDENT: If your vehicle was involved in an accident, please provide documentation from your insurance company or another insurance company which shows the towing charges are not being covered in full or in part under an insurance claim.

| | | | | |
|--|--|-----------------------|-------------------|----------------------------------|
| Type of Service (Circle One) | If vehicle was towed: | | Insurance Claim # | Were multiple vehicles involved? |
| Flat Tire Battery Fuel Tow | Tow from Accident? | | | Yes / No |
| Lockout Winch Other: | Yes / No | | | Yes / No |
| Breakdown Location (Street, City, State) | Vehicle towed to (Street, City, State) | | TOWING MILEAGE | |
| | | | | |
| | | | TOTAL CHARGES | |
| | | | \$ | |
| Name of Service Facility Providing Service | Breakdown Reason | Was AAA Called? | | POLICE INVOLVED? |
| | | Yes No | | Yes / No |
| | | What Number was Used? | | |
| | | | | |

Phone: _____

Why was AAA Service not used? _____

| | | |
|----------------------------|-----------------|--|
| FOR OFFICE USE ONLY | YJ: _____ | Policy: Basic Plus Plus RV Premier |
| Requested: \$ _____ | Check: _____ | Comments: |
| :001 \$ _____ | Prob: _____ | |
| :005 \$ _____ | Reason: _____ | |
| GW \$ _____ | | |
| Premier \$ _____ | | |
| RV \$ _____ | | |
| Original: Yes / No _____ | Initials: _____ | |
| Entitle: Yes / No _____ | | |
| Call: Yes / No _____ | | |