



Warrantech

An AmTrust Financial Company

DEALER PROFILE

Dealership Corporate Name _____

Dealership d/b/a _____

Address _____

City _____ State* _____ Zip Code _____

Email _____

Phone _____ Fax _____

Franchise(s) Represented _____

Dealer Principal _____ General Manager _____

F & I Manager _____ Office Manager _____

Service Manager _____ Service Phone _____

Retail Labor Rate \$ _____ Per Hour Shop Manual Used _____

Agent/Agency Name _____ Agent # _____

* State eligibility varies by program; Some states may require specific forms. Program specific approved states lists can be obtained by contacting your Agent Representative.

Program(s) Installed (check all that apply)

Your Agent Representative is required to provide a completed Product Installation/Change Sheet detailing each program installed.

- CustomEdge™
- RepairMaster™

NOTE: CustomEdge™ and RepairMaster™ cannot be installed and/or offered simultaneously.

- RepairMaster Service Drive™

- MileEdge®

- MobileEdge™

- OwnerEdge™

- _____

The following programs have program specific Product Installation/Change Sheets.

- SecureEdge™

- Month To Month™

- Extended Labor Protection

Administrative Office Use

DEALER #

MAIL ORIGINAL TO: 2200 Hwy 121, Suite 100, Bedford, TX 76021

PHONE: (800) 358-2655

FAX COPY TO: (817) 785-1139