

HOME LOCKOUT SERVICE REIMBURSEMENT REQUEST FORM



Please complete request form in its entirety.

Please mail this form to:

AAA Oregon/Idaho
Attn: Home Lockout Reimbursement
600 SW Market Street
Portland, OR 97201

The following must be attached:

- ✓ Original receipt
- ✓ Proof of residency⁽¹⁾

Reimbursement requests postmarked more than sixty (60) days after date of service WILL NOT be processed.

MEMBER INFORMATION

please print clearly

Membership#: _____ Name: _____ Exp. date: _____

Address: _____

City, State, Zip code: _____

Phone (home): _____ (work): _____ (cell): _____

SERVICE INFORMATION

Date of service: _____

Name of service provider: _____

Were they referred by AAA? Yes No

If no, did you request a referral from AAA? Yes No

Address of residence where service was provided⁽¹⁾: _____

Reason for Home Lockout service: _____

What service(s) were provided? (Check all that apply)

- Pick or drill lock Changing locks Other
 Re-keying New keys

Amount paid for service: \$ _____ Amount requested for reimbursement (must not exceed \$100): \$ _____

Signature of member: _____ Date: _____

⁽¹⁾Proof of residency not required if address of service is on file at AAA Oregon/Idaho. If not on file, please provide a copy of recent utility bill.

TERMS & CONDITIONS

Referral and reimbursement for Home Lockout Service is reserved for AAA Premier member's residence in Oregon/Idaho only and excludes all other buildings or locked areas. Home lockout service is not transferable to any other person. The Premier member must be present at the time of service. In the case of rental property, approval of a property owner may be required. Service is subject to provider availability. Locksmiths are independent businesses and may not have a contractual relationship with AAA Oregon/Idaho. AAA Oregon/Idaho assumes no liability of any kind for any damages incurred by the Premier member as a result of locksmith services. Reimbursement requests must be postmarked no later than 60 days after receiving service.

FOR OFFICE USE ONLY

Received:

Post marked:

Acct#: 512 162-510-000

Returned:

Input into CTS:

Receipt:

Prior usage:

Proof of residency:

Postmark:

Amount:

Premier member:

ACCEPT

REJECT