

		<u>For Office Use Only</u>	
Member #	Invoice Date	Received	
_____	_____	_____	
CODE:	_____	T	\$ _____
Invoice Amount	Description	P	\$ _____
_____	_____	RV	\$ _____
		ERS CALL #	_____



655 Uccy Street, Utica, NY 13502
 Schenectady, NY 12305
 Attention: ERS Reimbursements

(check one)
 Request for Emergency Road Service Refund Request for Trip Interruption Refund Service Complaint

*****Please Read Reverse Side Before Completing*****

Member's Name _____ Membership # 438-104 _____ Expires ___/___/___
 (Month/Yr)

Address _____ City _____ State _____ Zip _____

Daytime Phone Number _____ Date of Service ** _____ Time _____ AM or PM

Email address: _____ Trouble with Vehicle: _____

Year Of The Vehicle _____ Make _____ Model _____ License Plate # _____

Exact Location Of Vehicle At The Time Of Service _____

Did You Call AAA at 1-800-AAA-HELP (1-800-222-4357) to obtain Emergency Road Service? YES or NO

If AAA Was Not Contacted Directly Please Explain Why _____

Name And Address Of The Facility That Rendered Service _____

Were You Present With The Vehicle When Service Arrived? YES or NO

Did You Advise The Responding Driver That You Are An AAA Member? YES or NO

Did You Present Your Membership Card At The Time Of Service? YES or NO

How Long Did You Wait For Service? _____

Type Of Service Provided? __ Flat Tire __ Tow __ Battery/Jump __ Lockout/Key Svc __ Gas __ Winch
 __ Other (please explain) _____

If Vehicle Was Towed, Approximately How Many Miles? _____

Exact Location Vehicle Was Towed To _____

ORIGINAL PAID RECEIPT IN MEMBER'S NAME MUST BE ATTACHED

Amount Paid For Service? \$ _____

Signature Of Member _____ Date _____

****IMPORTANT NOTE: Applications must be received within 30 days of date of service to be eligible for refund consideration**

The reverse side contains AAA Northway's reimbursement policy procedure and space for additional information.
Please call 1-800-AAA-HELP 24 hours a day – 7 days a week for Road Service
Or visit our website at aaa.com

