

CUSTOMER CLAIM FORM - KIA ROADSIDE ASSISTANCE

- **Important:** Please refer to your Warranty and Consumer Information Manual for details of Kia's Roadside Assistance coverage.
 - Submit all claims, fully documented, within 30 days of disablement.
 - Please retain a copy of all receipts and send original documentation.
 - Additional copies of this form are available from your KIA dealer or at www.kia.ca

1. Owner Information
First Name Last Name
Street Apt. No. City
Prov. Postal Code Residence Phone Business Phone
2. Information Concerning Your Vehicle
venicle identification Number
3. Make Cheque Payable To: (if different than owner)
Name Street
City Prov. Postal Code Residence Phone
City 1 Tox. 1 Ostal Code Residence Friorie
4. Complete when claiming for Towing or Roadside Service Reimbursement (Maximum \$100)
DOADCIDE CEDIMOE ECTABLICIMENT
ROADSIDE SERVICE ESTABLISHMENT
Name Street
City Prov. Postal Code Business Phone
Amount Paid:
\$ Road Service \$ Towing
PLEASE INCLUDE paid receipts validated by the roadside service establishment and which clearly detail the nature of the service provided.
5. Emergency Travel Expense Reimbursement Details of Your Vehicle Disablement Details of Reimbursrment Request:
(Maximum \$300)
YOU MUST INCLUDE THE FOLLOWING DOCUMENTS: Location: Meais: \$
Paid receipts for reasonable covered expenses Date: Accommodation:
incurred within 3 days of disablement. Cause: Accident Rental: For disablement due to failure of components covered by your
warranty coverage, a copy of the repair or work order. Other (please specify) Transportation:
Other:
6. 'I have completed this form and certify that the information provided is complete and accurate.'
Signature of Owner Date