

## Lincoln Roadside Assistance - Customer Claim Form

## **Important:**

- For details of Lincoln Roadside Assistance coverage and items eligible for reimbursement, please refer to your 'Warranty Guide'.
- Please include a letter detailing the sequence of events from the time the vehicle broke down to the time the vehicle was picked up.
- Include paid receipts that clearly detail the nature of the service being claimed, including copies of the repair or work order that pertained to the breakdown.
- Please retain a copy of all receipts and send original documentation.
- Please allow 4 to 6 weeks for processing.

1. Owner Information		
Salutation Mr. Mrs.	Ms. Dr.	
First Name	Last Name	
Street	Apt. No. City	
Prov. Postal Code Residence	Phone Business P	hone
2. Vehicle Identification Number  3. Payee Information		
First Name	Last Name	
Street	Apt. No. City	
Prov. Postal Code  4. 'I have completed this form and certi	fy that the information provided is c	omplete and accurate.'
Signature of Owner  5. Sign and mail this complete form wit	h receipts to:	Date

Ford Motor Company of Canada Limited Roadside Assistance Division The Canadian Road, PO Box 2000 Oakville, ON L6K 1C8



lease use this section to describe the events that occurred. dditional pages can be added as needed.		