



QAP OUT OF AREA SERVICE AGREEMENT FORM



Selling Location Name City, State/Province, Zip

Vehicle Year/Make/Model VIN

Customer Name City, State/Province, Zip

Instructions: Complete this form only if the customer is outside your dealer service area. Check one box below (A, B, or C) and have the customer sign the form. If B is checked, obtain a signature from the servicing dealer.

A We, the selling location, will service the customer at their request, even though the customer is outside our service area.

B We have established an agreement with the following QAP accredited dealer to service the customer.

Servicing Location Name Phone

City, State/Province, Zip Servicing Dealer Signature

C One of the three conditions outlined below are true and we are unable to service the customer. Place a check mark in the box to indicate which of the three conditions apply and complete the form as necessary. At least one box (1-3) must be checked and Customer Acknowledgement must be signed.

(1) There is no NMEDA QAP accredited location within 100 miles (160 km) or 2hr driving distance from the customers location (without crossing international borders). The closest NMEDA QAP accredited location is approximately ____ mi/km or ____ hours driving distance from the customer's location.

(2) None of the accredited locations contacted** have technician(s) certified to repair/service all of the mobility equipment installed by the selling location.

(3) None of the accredited locations contacted** agrees to service the mobility equipment installed.

****Note:** If box (2) or (3) are checked, the selling location must contact a minimum of four NMEDA QAP accredited locations in the customer's area and list them on this form. Additional note: there may be more than four locations in the customers' area, not all may have been contacted, if there are less than four locations in the customers' area, all shall be contacted and listed.

List all NMEDA QAP Accredited Locations Contacted:

Location Name:	City, State/Province, Zip	Date Contacted:	Name of Person Contacted:

Customer Acknowledgement

I understand that this vehicle/equipment is being delivered outside of the selling dealer's service area, or that there is no NMEDA QAP accredited location, or none capable, or in mutual agreement to perform servicing on my vehicle. By signing below, I acknowledge that I am the one with primary responsibility for this vehicle and that I am waiving the selling dealers' obligation to provide 24/7 Emergency Service as outlined in the NMEDA QAP rules effective on the date signed. Furthermore, I understand that I will be responsible for the costs of transporting the vehicle to the selling location or any other service location of my choosing if repairs, routine maintenance, or service are required.

Customer Signature Date

Selling Dealer Signature Date
Additional Comments:
