

Administrative Office
3901 Commerce Park Drive
Raleigh, NC 27610
Sales/Service: (855) 324-3085
Dealer: (855) 879-8093



Shipping/Mfg. Location
4654 East Markle Road
Markle, IN 46770
Technical: (877) 291-6309
Fax: (260) 758-2215

Dealer Vehicle Check-In

**DEALER REPRESENTATIVE TO FILL OUT AND SUBMIT WITHIN 72 HOURS TO
SERVICE@ATCONVERSIONS.COM OR FAX TO (260) 758-2215**

ATC CONVERSION #

Business Name: _____ Dealer #: _____ Phone: (____) ____-_____

Street: _____ City: _____ State: _____ Zip: _____

Please initial the following vehicle check-in list.

- | | |
|--|--|
| _____ Visual inspection of Exterior/Interior | _____ Check hydraulic reservoir fluid levels |
| _____ Ensure conversion power breaker is ON | _____ Locate ATC Owner's Manual |
| _____ Operate both ATC fobs | _____ Locate ATC Warranty Registration Form |
| _____ Verify remote start operation | |

Please make note of any issues.

The Mobility Retailer agrees to electronically submit this completed Mobility Conversion Service Agreement to ATC immediately (within 3 business days) after the customer review takes place. Additionally, the dealer agrees to maintain a copy of this document, with appropriate signatures affixed, for a period of six (6) years. To ensure that completed records are maintained by the Mobility Retailer, ATC has the right to periodically audit the applicable records to determine dealer conformance. The Mobility Retailer agrees to cooperate with ATC in providing copies of these records. Failure to comply with these terms may nullify any obligation that ATC may have to pay warranty claims submitted by the dealer.

All items check-in items have been reviewed and initialed.

x_____ Date: _____

Printed Name: _____