

Courtesy Car Direct Billing Invoice

Use this form to request reimbursement for courtesy car expenses during vehicle repairs.

To request rental car rates for vehicles three years or newer, please use the loss of use web portal.

The courtesy vehicles provided to customers must be free of body damage, cleaned prior to each rental, and mechanically sound.

Claimant Name:	Claim Number:		
Repair Shop:	Shop Reference Number:	Shop Reference Number:	
Registered Account Number:	GST Number:	GST Number:	
Vehicle Year/Make/Model:	Courtesy Car Plate Number:	Courtesy Car Plate Number:	
Vehicle registered as U-Drive? Yes	No (must have U-Drive insurance to bill for rein	nbursement)	
Start Date: (dd/mm./yyyy)	Total Labour Hours:		
End Date: (dd/mm/yyyy)	÷ 8 Hours:		
Explanation for Additional Days:	Paint Dry Time: (Enter 0 or 1 day, as applicable) Additional Days: (Requires explanation)		
	Total Days:		
	Daily Rate:	35.50	
	Total:		
Signature (Shop Manager)	Date (dd/mm/yyyy)		
Claimant Certification			
l,was provided by the repair facilities, to me for	(print name), confirm that the above no r the number of days specified.	ted vehicle	
Signature (Claimant)	Date (dd/mm/yyyy)		
Submit the comp	pleted form to <u>CPUnit@mpi.mb.ca</u> .		

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If you have any questions about this information, please contact the Claims Processing Unit at 204-985-7500 or CPUnit@mpi.mb.ca.