

# **Application for Light Vehicle Repair Facilities**

## **Autobody and Frame Accreditation**

Applicants are required to meet the qualifications stated in the Light Vehicle Accreditation Agreement prior to applying. For franchises, each location is required to qualify separately. All applicants will be notified of their status in writing by Manitoba Public Insurance.

This application must be completed in full. Incomplete applications may be returned.

Legal Name of Business:		Registered Account Number
Operating Name:		
Facility Address:		
Telephone Number:	Fax Number:	
Email Address:	Website:	

### **Technician Training and Certification**

Repair facilities must have a minimum of one qualified journeyperson or equivalent, and they must designate each technician to one of the following roles:

Estimator (EST)	Steel Structural	Non-Structural	Refinish Technician (RT)	Aluminum Structural
		Technician (NST)		Technician (AST)

Please list all employees and their required information below.

EMPLOYEE NAME	SST	NST	EST	RT	AST	OTHER ROLE (i.e., Manager)	RED SEAL # (if applicable)	I-CAR#



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#### **Autobody and Frame Equipment**

Please include details on all relevant shop equipment.

Equipment	Manufacturer	Model #
Frame/Bench Rack		
Electronic 3-D Vehicle Measuring System		
Spray Booth		
OEM Approved Refinishing System or equivalent		
Squeeze-Type Resistance Spot Welder		
Pulse MIG Welder		
Headlamp Aiming Equipment		
MAG Welder		
Aluminum welder		

#### **Insurance Requirements**

Repair facilities must meet and submit proof of all insurance requirements as outlined in the Light Vehicle Accreditation Agreement.

#### **Technology Requirements**

Repair facilities must meet all technology requirements for both digital imaging and Mitchell product software as outlined in the Light Vehicle Accreditation Agreement.

### I-CAR Gold Class Recognition

Confirm that the repair facility has achieved I-CAR Gold Class Store Recognition by checking one of the boxes below.

I-CAR Gold Class Recognition

I-CAR Gold Class – Aluminum Recognition



## **Autobody and Frame Accreditation**

#### Declaration

I hereby declare that the preceding information is true and correct. Upon approval of my application by Manitoba Public Insurance, I agree to promptly execute the signature page of the Light Vehicle Accreditation Agreement in order to establish my repair facility's accreditation status.

Signature

Position

Date

Personal information on this form is collected pursuant to section 36 of the Freedom of Information and Protection of Privacy Act and is used for the purpose(s) of processing applicant information. Information is collected, used, and disclosed in accordance with the Freedom of Information and Protection of Privacy Act. Should you have any questions about the collection of information, please contact Accredited Repair through the repair shop support line – 1-855-882-4313, option 6.