



Approved Repairer Investigation Request

Please complete this form and return to:

RAA Car Advice, 101 Richmond Road, Mile End SA 5031, or email to: caradvice@raa.com.au

Applicant's name	
Member number	
Address	
	Postcode
Name of Repairer	
Address of Repairer	
	Postcode
Vehicle make	Registration number
Year of manufacture Mo	odel
Body type Eng	gine capacity
Current odometer reading	km
Date of repair / /	
Odometer reading at time of repairs	km
Has the account been paid? Yes N	0
If yes, in full or part?	
Have you contacted the Repairer regarding	g this complaint? Yes No
If no, please do so before proceeding furth	ner If yes, date contacted / /
Response from Repairer	





Have all relevant documents and receipts been included with this form?	Yes	No
If not, please list any key documents that are missing.		
Do you authorise RAA to contact the Repairer on your behalf?	Yes	No
Do we have the Repairer's permission to enter the premises for the	Yes	No
purpose of inspecting your vehicle and/or parts?		(If applicable)
Are all vehicle parts subject to this matter available for RAA to inspect?	Yes	No
If yes, are they in your possession?	Yes	No
What do you consider a reasonable basis of settlement?		
Have you obtained information or taken any action through the Office of	Yes	No
Consumer and Business Services or from any person in the legal profession?		
If so, what was their advice?		



101 Richmond Road Mile End, South Australia 5031 **T** 08 8202 4689 **E** Caradvice@raa.com.au raa.com.au

Please write a brief summary of the complaint				
Applicant to sign and date				
Name	Date	/	/	
Signature				