



LICENSEE APPLICATION FORM

GENERAL INFORMATION

Legal Business Name:	<input type="text"/>	Year Est:	<input type="text"/>
Company Name:	<input type="text"/>	Address:	<input type="text"/>
Owner Name:	<input type="text"/>	City:	<input type="text"/>
Shop Manager Name:	<input type="text"/>	Province:	<input type="text"/>
Website:	<input type="text"/>	Postal Code:	<input type="text"/>
Hours M-F:	<input type="text"/>	Hours S:	<input type="text"/>

CONTACT INFORMATION

Phone:	<input type="text"/>	General Inquiry Email:	<input type="text"/>
Assignment Email:	<input type="text"/>	Accounting Email:	<input type="text"/>

BUSINESS SPECIFICATIONS

Business Type:	<input type="text" value="INCORPORATED"/>	<input type="text" value="PARTNERSHIP"/>	<input type="text" value="LIMITED"/>	<input type="text" value="SOLE PROPRIETORSHIP"/>
Facility Status:	<input type="text" value="INDEPENDENT"/>	<input type="text" value="DEALERSHIP"/>	<input type="text" value="MSO"/>	<input type="text" value="FRANCHISE"/>
Business License:	<input type="text"/>	Municipal License:	<input type="text"/>	
GST#:	<input type="text"/>	HST#:	<input type="text"/>	
PST#:	<input type="text"/>	Building Status:	<input type="text" value="OWN"/>	<input type="text" value="LEASE"/>
Number of Locations:	<input type="text"/>	Production Sq.Ft.:	<input type="text"/>	
Office Sq.Ft.:	<input type="text"/>	Wheelchair Accessible:	<input type="text" value="YES"/>	<input type="text" value="NO"/>
Customer Parking Spaces:	<input type="text"/>	Preferred Rentals:	<input type="text"/>	
Vehicle Storage Capacity:	<input type="text"/>	Fleet Vehicles Owned:	<input type="text"/>	

BUSINESS INSURANCE INFORMATION

Carrier:	<input type="text"/>	Policy Number:	<input type="text"/>
Amount:	<input type="text"/>	Deductible:	<input type="text"/>

SALES STATISTICS

Current Sales YTD:

Prior Year Sales:

Avg Repair Orders per Month:

Total Capacity per Month:

EMPLOYEE INFORMATION

Total Employees:

Office/Admin:

Body Persons:

Body Apprentices:

Painters:

Paint Apprentices:

Mechanics:

Other:

Specify:

Employee Compensation: FLAT RATE HOURLY

Other Services Offered:

MARKET SHARE

Area Population:

Est. Market share:

Est. Growth Potential:

5-Year Sales Target:

CUSTOMER SERVICE

CSI Tracking System: YES NO

If YES, Service Provider:

Lifetime Warranty: YES NO

SHOP TECHNOLOGY

Audatex: YES NO

Audatex Estimate Check: YES NO

Audatex ID:

Mitchell: YES NO

Mitchell ID:

Management System:

IT Support Contract: YES NO

Service Provider:



TRAINING PROGRAMS, CERTIFICATIONS AND ACCREDITATIONS

I-CAR:	YES	NO	I-CAR GOLD:	YES	NO
CCC:	YES	NO	CCIAP:	YES	NO
Other:			Other:		

INSURANCE COMPANY REFERRAL PROGRAMS (DRP)

ALLSTATE	AVIVA
CAA/AMA/BCAA INSURANCE	COOPERATORS GROUP
DGIG/DESJARDINS	ZURICH
GORE MUTUAL	INTACT
NORTHBRIDGE	AMA
UNICA	SGI
ECONOMICAL	TRAVELERS
PROMUTUEL	WAWANESA
TD INSURANCE	BENEVA
INDUSTRIELLE ALLIANCE	ALPHA INSURANCE

OE CERTIFICATIONS

ACURA (NSX)	AUDI
BMW	FCA STELLANTIS
FERRARI	FORD ALUMINUM
GENERAL MOTORS	GENESIS
HONDA ACURA PROFIRST	HYUNDAI
JAGUAR LAND ROVER	KIA
LAMBORGHINI	LEXUS
MERCEDES-BENZ	NISSAN INFINITI
SUBARU	TOYOTA
TESLA	VOLKSWAGEN
VOLVO	CCC

EQUIPMENT AND SERVICES CHECKLIST

SYSTEMS	YES	NO	COMMENTS
Alldata			Version 3 Required
TOOLING & EQUIPMENT	YES	NO	TYPE/MAKE/COMMENTS
Government Approved Spray Booth			
In-House Scanning Tools			
Ventilated Explosion-Proof Mixing Room			
Dedicated Frame Pulling System			
3D Electronic Measuring System			
MIG Welder			
Inverter Resistance Spot Welder			
Aluminum Welder			
VENDORS & RECYCLING	YES	NO	SUPPLIER
Paint Vendor (Akzo, BASF, PPG)			
Supplies Distributor(s)			
Plastic Recycling – Bumpers			
Enviro Waste Recycler			
Metal & Aluminum Recycler			
ADDITIONAL REPAIRS	YES	NO	COMMENT
Separate Aluminum Repair Area			
Separate Aluminum Tools			
Dent Removal – Aluminum/Steel			
Glass Repair and Install			
ADAS Recalibration			
SRS Repair and Replacement			
Wheel Install and Balance			
Four Wheel Alignment Machine			
Mechanical Part Install			
AC Recovery R134a and 1234YF			
Plastic Welding			
Hoist			

DIGITAL PHOTOS

Please provide digital photos of the following areas:

- Overall Exterior View
- Customer Restroom
- Repair Area
- Refinish Area
- Paint Booth
- Secured Storage Area and Compound
- Reception Areas
- Customer Parking

ACKNOWLEDGEMENT

I HEREBY DECLARE THAT THE INFORMATION PROVIDED IS ACCURATE AND MAY BE VERIFIED FOR THE PURPOSE OF LICENSE CONSIDERATION. I HAVE RECEIVED A COMPLETED COPY OF THIS APPLICATION.

APPLICANT NAME:

APPLICANT SIGNATURE:

DATE COMPLETED:

CSN REPRESENTATIVE: