Vehicle Inspection Program Service Agreement – 4-Wheel Alignment



Out of Province Insp	ection Facility				
Facility Number Facility Name					
Location Address	I	City	Province	Postal Code	
Phone Number		Facility Contac	Facility Contact Person		
Thore Number		Tacility Contact (Cl3011			
4 14/h 1 4 lt 1 1					
4-Wheel Alignment I Facility Number	Facility Facility Name				
racility Number	racility Name				
			1		
Location Address		City	Province	Postal Code	
Phone Number		Facility Contac	Facility Contact Person		
<u>.</u>					
This Service Agreeme	ent specifies that	4 144	4-Wheel Alignment Facility will provide		
computerized 4-whe	el alignment equipmer	nt that prints results	5		
to			, when required.		
	Out of Province Facility		·		
	Equipment Informatio	n	T		
Make		Model			
Software available (inclu	ıding years)				
Authorizations					
Out of Province Facil	litv	4-Who	eel Alignment Facility		
Facility Number			Facility Number		
Name		Name	Name		
Nume		Name	Nume		
Title		Title	litle		
Signature		Signa	Signature		
Date		Date			