

MasterTech Online User Access Authorization Agreement

Today's Date: _____

Dealership Name: _____

Group Access: Yes No

MasterTech Dealer Number: _____

SEcureMetrics: Yes No

Authorization Level

Level 1: Contract Lookup, Verify Coverage, & Claim Lookup (for Service Advisors, Consultants, & Service Managers)

Level 2: Level 1 plus Cancel Quote (for Office Staff, Business Managers/F&I Managers, & Sales Managers)

Level 3: Level 1 & 2 plus Dealer Statements (for Office Manager, Comptroller/Controller, CFO, & Dealer)

Authorization Personnel

Authorization Level*	First Name *	Last Name *	Position/Title*	E-Mail Address*

By signing this authorization, you are hereby acknowledging that American Financial Warranty Corporation and their partners may grant access to your data to the above listed individuals. Further, it is your (the Dealer's) responsibility, to notify us, in writing, of any changes that need to be made to the persons who are allowed access to your data.

Dealer Representative: _____

Printed Name: _____

Title: _____

Date Signed: _____

Please allow approximately 2 business days for processing.