MasterTech Online User Access Authorization Agreement

Today's Date: _____

Dealership Name: _____

MasterTech Dealer Number: _____

Authorization Levels:

Advisor: Contract Lookup, Verify Coverage, & Claim Lookup (Service/Sales Advisors, Consultants, Service Managers, & Sales Assistant)
Office: Advisor + Cancel Quote & SEcureMetrics (Office Staff, F&I Managers, General Managers & Sales Managers)
Administrator: Advisor & Office plus SEcureMetrics Admin Tools (Office Managers who have authority to modify deals in SMetrics)
Accounting: Advisor, Office, & Administrator plus Dealer Statements (Comptroller/Controller, CFO, & Dealer)

Authorization Level	First & Last Name	Position Title	E-Mail Address	Quick Rater Yes	MT Online Group Access Yes	SEcureMetrics Group Access Yes
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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.