



**PREMIER®**  
DEALER SERVICES

**PREPAID MAINTENANCE PROGRAM**

DEALER NAME		DEALER NUMBER		
ADDRESS				
CITY		STATE		ZIP
PREPARED BY		E-MAIL ADDRESS		TELEPHONE
DATE REMITTED	CHECK NO.	CHECK DATE	CHECK AMOUNT	TOTAL NO. OF CONTRACTS

Make checks payable to **PDS/ARCH**

	CONSUMER NAME	EFFECTIVE DATE	DEALER REMITTED
1)			
2)			
3)			
4)			
5)			
6)			
7)			
8)			
9)			
10)			
11)			
12)			
13)			
14)			
15)			
16)			
17)			
18)			
19)			
20)			
			\$

- ✓ All business must be remitted and paid for on a weekly basis
  - ✓ Attach "Administrator" copy of each contract
    - ✓ Attach any spoiled contracts

**SUBMIT ALL BUSINESS TO:**  
**PREMIER DEALER SERVICES, INC.**  
 P.O. BOX 23880 • SAN DIEGO, CA • 92193-3880  
 PHONE: 800-886-8176 FAX: 858-522-6201