

**Customer Questionnaire
Steering Information Form**



When you called your insurance carrier to report your claim...

1. Were you informed that you have the right to use the repair facility of your choice?
 Yes No
- a. If yes, at what point were you informed of this right?
 Right away After being referred Only after asking
1. Were you directed to a particular repair facility?
 Yes No
- a. If yes, was the referral printed on the insurance company estimate?
 Yes No
1. Did you feel pressured, coerced or intimidated to use a particular repair shop?
 Yes No
1. Did the insurance company state (or infer) that it would cost you more or that there would be delays in completing repairs unless you went to a particular shop?
 Yes No
1. Did you report your claim to:
 Agent Insurance Carrier

Your insurance company is: _____

Your name, city, & state: _____

Please fax this form to (860) 848-0534 when completed.