



## EMPLOYEE REBATE - OWNER VERIFICATION FORM

**\*\*Complete this Form Only if Employee's Vehicle is Not Registered in the Employee's Name\*\***

VEHICLE BELONGS TO: \_\_\_\_\_ / \_\_\_\_\_  
EMPLOYEE STORE

VEHICLE DESCRIPTION: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
MAKE MODEL YEAR

VEHICLE REGISTERED TO: \_\_\_\_\_

FINANCIAL OWNERSHIP  
VERIFIED BY: \_\_\_\_\_ / \_\_\_\_\_  
ASSISTANT VICE PRESIDENT DATE

**INCLUDE THIS FORM WHEN SUBMITTING COPIES OF YOUR INVOICE AND VEHICLE  
REGISTRATION TO EMPLOYEEEBATE@DISCOUNTTIRE.COM.**