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PENNSYLVANIA AUTOMOTIVE ASSOCIATION

ATTENTION:
New Car and Truck
Service Managers

\$1,000 TOOL GRANT PROGRAM FOR NEW TECH HIRES

This grant is intended for your **Techs** who are new full-time hires at your dealership and the first time the tech has been hired at a franchised new car and truck dealership in Pennsylvania.

TOOL GRANT GUIDELINES AND CRITERIA:

- PAA will award a **maximum of 100 tool grants per year at \$1,000 each.**
- One tool grant awarded per dealership rooftop, per calendar year.
- New tech must be employed for 90 days before applying.
- Applicants are no longer eligible to apply if more than 1 year has passed since date of hire.
- Service manager must approve the tech.
- Tech's choice of tool brand and Tech retains ownership of tools.
- Tool grants will be awarded on a first received, first awarded basis.

EMPLOYMENT BONUS

PAA's Tool Grant Program is an employment bonus to boost your new tech's tool purchasing power!

Application on the following 2 pages – both must be completed and submitted at the same time.

Questions??

Contact Kelly Fromuth at (717) 255-8311 x3342
KFromuth@paa.org
or Melanie Stine x3327 MLStine@paa.org





Tool Grant Program Application

To Be Completed Applicant:

EMPLOYEE INFORMATION

Name: _____

Street Address: _____

City: _____ State: _____ Zip: _____

Date of Birth: _____ Primary Phone Number: _____

E-Mail Address: _____

Name of Technical/High School: _____ Date of Graduation: _____

Are you a student or graduate of a technician-training school/program?* Circle one: Yes No
If yes, name and location of school/program: _____

****Not a Requirement of the Tool Grant Program***

Signature: _____

Please Note: By signing this form, you acknowledge that, if awarded a PAA Tool Grant, you will be required to complete a W9 and you will receive a 1099 at the end of the year.

DEALERSHIP INFORMATION

Date of Hire: _____

Name of Dealership: _____

Street Address: _____

City: _____ State: _____ Zip: _____

Service Manager Name: _____

Phone Number: _____ E-Mail Address: _____

Questions??

Contact Kelly Fromuth at (717) 255-8311, extension 3342 KFromuth@paa.org
or Melanie Stine at extension 3327 MLStine@paa.org



Tool Grant Program Application

To Be Completed By Service Manager:

TECHNICIAN EMPLOYMENT VERIFICATION

I verify that _____ (Technician's Name)

has completed 90 days of full-time employment as a Technician, at

_____ (Dealership Name) located in

_____ (City) _____ (State) _____ (Zip).

I recommend _____ (Technician's Name) as a

qualified applicant for the PAA \$1000 Tool Grant Program for Technicians.

Service Manager Printed Name: _____

Service Manager Signature: _____

Phone Number: _____ E-Mail Address: _____

Name Tool Brand Preference: _____

**Submit completed forms to:*

**PAA
c/o Tool Grant Program
PO Box 2955
Harrisburg, PA 17105
ATTN: Kelly Fromuth**

OR

**Scan and email completed form to
Kelly Fromuth KFromuth@paa.org**

Questions??

Contact Kelly Fromuth at (717) 255-8311, extension 3342 KFromuth@paa.org
or Melanie Stine at extension 3327 MLStine@paa.org