

DEALER PERFORMANCE EVALUATION

Distributor Name: _____ Distributor Code: _____
 Dealer Name: _____ Dealer Code: _____
 Service Dealer Agreement Expiration Date: _____

1. Dealer Product Service Addendum (check all that apply)*

*Verify that all Products and service levels selected below agree with Allison Transmission's Sales + Service Locator.

Product Series	Maintenance	Overhaul	TCM Reprogramming
1000 Series™ and 2000 Series™	☐	☐	☐
3000 Series™	☐	☐	☐
4000 Series™	☐	☐	☐
9-Speed	☐	☐	☐
5000 Series™	☐	☐	☐
6000 Series™	☐	☐	☐
8000 Series™	☐	☐	☐
9000 Series™	☐	☐	☐
FracTran®	☐	☐	☐
eGen Power®	☐	☐	☐
eGen Flex®	☐	☐	☐
H 40/50 EP™	☐	☐	☐

2. Training

Review Training Records Reports from Allison E-Learn by either completing the table(s) below or by attaching the reports from Allison E-Learn to this evaluation.*

On-Highway Products- Maintenance									
	E-Learn Reg'd	TCM Reprog.							
Technician Name	(Y/N)	(Y/N)	1/2000	3000	4000	9-Speed	H 40/50 EP™	eGen Flex	eGen Power

On-Highway Products- Overhaul									
	E-Learn Reg'd	TCM Reprog.							
Technician Name	(Y/N)	(Y/N)	1/2000	3000	4000	9-Speed	H 40/50 EP™	eGen Flex	eGen Power

Off-Highway Products												
	E-Learn Reg'd	TCM Reprog.		Maintenance				Overhaul				
Technician Name	(Y/N)	(Y/N)	5000	6000	8000	9000	Frac Tran	5000	6000	8000	9000	Frac Tran

**If an Allison Authorized Dealer does not have at least two (2) trained technicians for its Product and service levels, corrective action is required.*

3. Annual Parts Purchases

Product Family	Previous Year Sales	Year to Date Sales
On-Highway	\$	\$
Off-Highway	\$	\$
Total	\$	\$

4. ReTran® Sales by Volume

Product Series	Previous Year Sales	Year to Date Sales
1000 Series™ and 2000 Seies™	\$	\$
3000 Series™	\$	\$
4000 Series™	\$	\$
9-Speed	\$	\$
H 40/50 EP™	\$	\$
eGen Flex	\$	\$
eGen Power	\$	\$

5. Does this Dealer have an OEM affiliation? Yes ☐ No ☐

If yes, select the Original Equipment Manufacturer (OEM) line(s) represented:

☐ Akia	☐ Hino	☐ Mack	☐ Temsa
☐ Autocar	☐ Hitachi	☐ MAN	☐ Thomas Built Bus
☐ Bell Equip	☐ Hyundai	☐ Mercedes Benz	☐ UD Truck
☐ Bluebird	☐ IC Bus	☐ Mitsubishi Fuso	☐ Van Hool
☐ BMC	☐ International	☐ Peterbilt	☐ Volkswagen
☐ Daewoo	☐ Isuzu	☐ Prevost	☐ Volvo
☐ DAF	☐ IVECO	☐ Scania	☐ Volvo Const. Equip/Terex
☐ Freightliner	☐ Kalmar/Ottawa	☐ Setra	☐ Western Star
☐ Golden Dragon	☐ Kenworth	☐ Tata	☐ Other
If Other, specify here:			

6. Requirements Met

- | | |
|---|--|
| ☐ Essential Hand Tools | ☐ Minimum Training Requirement |
| ☐ Flush Cart | ☐ Sufficient Parts Inventory |
| ☐ Allison DOC® | ☐ Approved Warranty Labor Rate Does Not Exceed Posted Retail Labor Rate |
| ☐ Allison Authorized Signage | |

7. Review and Sign

Audit Score: Pass ☐ Fail ☐

Corrective Action Required (if any):

Corrective Action is to be Completed by:

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Notes (if any):

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(Distributor Personnel Signature)	(Dealer Personnel Signature)
(Distributor Personnel Name)	(Dealer Personnel Name)
(Date)	(Date)