Independent Repair Provider
Program Overview and Notification of Interest

Apple will use the following criteria to determine whether your organization is eligible for the Independent Repair provider program. This information will be reviewed and followed up with a request you sign a non-disclosure document before we can provide additional details on the program. Please note, the entire process may take between six and eight weeks to complete.

Requirements

1. Business Profile, please complete all entries in the form below, use n/a where not applicable

2. Required attachments
    *   Photos (taken within the last 6 days) of each service location to include:
        *   Entry front
        *   Street frontage
        *   Reception area

Note, Apple may provide a credit line to credit eligible applicants for use with Apple purchases (e.g. required tools, equipment, service parts). Locations that cannot meet credit requirement may submit an Irrevocable Standby Letter of Credit from your bank, a cash deposit, or pay for parts in advance. Apple uses Dunn & Bradstreet as a resource for this credit information. More information may be found at: https://www.dnb.com/duns-number.html

Submit this form with the required pictures to IRP_Applicant_US_CA@apple.com. You will receive a reply referencing your request number. Please include this number in all correspondence.

If you have any questions regarding the application process please contact IRP_Applicant_US_CA@apple.com, please include your application number referenced in the subject line.

Thank you for your interest.

Details about the legal status of the company

Legal Company Name	
Trading Name (N/A if same)	
Name of parent group (N/A is same)	
Registered Address	
City	
State	
Postal Code	
Company Website Address	
Contact Name	
Contact Email	
Contact Phone Number	

Service Location Information

Details about the location(s)). If you wish to apply for more than one service please include those details in an attachment. Only one request for your company is needed for all of your service locations.

Trading Name (N/A If same)	
Service Location Address	
City	
State	
Postal Code	
Telephone Number	
Operating Hours	

- Is your company a franchisee? _____
- Is your company a franchisor? _____
- How many end user facing locations does your company have? _____
  - *Note, pictures are required for each location.*

Existing/Previous Apple Relationships

If you already have, or have had, a business relationship with Apple (e.g., Reseller, Professional Services, Training, Consultant Network), please provide details here. (Enter N/A if none)

Relationship Type	Account Number (if applicable)	Apple Contact Name

Declaration

I confirm that I am authorized to pursue an application on behalf of the company detailed in this application form.

Contact Name	
Contact Title/Position	
Contact Email	
Contact Phone	

Please do not forget to attach the required pictures.