

# CANCELLATION FORM

## Seller Information (Please print)

Name: \_\_\_\_\_

Address: \_\_\_\_\_  
*Street Address* *Suite/Unit #*

\_\_\_\_\_

*City* *State* *ZIP Code*

Phone #: \_\_\_\_\_ Fax #: \_\_\_\_\_

Today's Date: \_\_\_\_\_ Gross Refund Amount: \_\_\_\_\_

Preparer's E-mail: \_\_\_\_\_

## Customer/Borrower Information (Please print)

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Contact #: \_\_\_\_\_ Contract #: \_\_\_\_\_ VIN: \_\_\_\_\_  
(Last 6 Digits)

## Reason for Cancellation (Please check one)

*Cancellation requests cannot be processed without the supporting documentation.*

- Repossession Attach proof of repossession from lienholder
- Customer Request Obtain Customer/Borrower's signature and attach  
Customer/Borrower correspondence
- Other, please explain \_\_\_\_\_

(Please include any supporting documentation)

Please cancel Contract/Waiver on the above identified vehicle effective on the cancellation date listed below. I understand that once cancelled, coverage may neither be repurchased nor reinstated. A cancellation fee may apply unless prohibited by state law (refer to Your Contract/Waiver to see if the cancellation fee does not apply.)

\_\_\_\_\_  
Customer/Borrower Signature

\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_  
Cancellation Date

\_\_\_\_\_  
Seller Personnel Signature

\_\_\_\_\_  
PRINT Name