

VEHICLE SERVICE CONTRACT CANCELLATION REQUEST

To Be Completed and Signed By the Contract Holder and the Selling Dealer.

COMPLETE ALL SECTIONS OF THIS FORM. INCOMPLETE FORMS AND MISSING DOCUMENTS WILL GREATLY DELAY THE CANCELLATION REQUEST

CONTRACT HOLDER				SELLING DEALER		
Name				Name		
Address			Apt No.	Address		
City	State	Zip Code		City	State	Zip Code
Vehicle Service Contract Number				Vehicle Identification Number		

LIENHOLDER INFORMATION

Has Lienholder been paid in full? YES NO If YES , attach evidence of payoff. If NO , complete the following:						
Lienholder Name				Account Number		
Address			City	State	Zip Code	

CONTRACT INFORMATION

Date Contract Sold	Vehicle Mileage at Sale	Date Contract Cancelled	Vehicle Mileage at Cancellation
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REASON FOR CANCELLATION

PLEASE CHECK ONE (1) OF THE FOLLOWING REASONS AND ATTACH REQUIRED DOCUMENTS.

Customer Request – Attach Customer’s copy Vehicles Service Contract. If unavailable, Customer must put request in writing in the space below.

Repossession – Attach a copy of repossession papers from Lienholder.

Total Loss – Attach copy of Total Loss Report.

Unwind – Attach Customers’ copy of Vehicle Service Contract and provide a brief explanation from flat cancellation. Use space below.

Other – Please explain. Use space below.

Use lines below to provide any required explanation.

SIGNATURES

Required to process Cancellation Request

_____	_____	_____	_____
Customer’s Signature	Date	Dealer Representative Signature	Date

PLEASE SUBMIT THE COMPLETED FORM TO lynnq@quirkcars.com