

CANCELLATION REQUEST FORM



Instructions:

1. Complete information and submit all required documents (incomplete submissions will be returned unprocessed).
2. Attach your copy of the original Contract.
3. Submit the request using a traceable delivery method:

Email: cancellations@nationwarranty.com
 Fax: (954) 340-7465
 Address: NWC - Cancellation Department
 5571 University Drive, Suite 201
 Coral Springs, FL 33067

Today's Date	_____
Email Address	_____
Fax Number	_____

4. **Once your refund is processed, we will notify you of the amount you are to receive from your selling dealer by Email or Fax. If you have not received your refund within 30 days from today's date, please contact your selling dealer for your unpaid refund amount. If retail premium was paid directly to NWC, we will pay you.**

Product to be Cancelled	Reason for Cancellation
<input type="checkbox"/> GAP	<input type="checkbox"/> Customer Request (Letter or this Form-signed and dated by customer)
<input type="checkbox"/> Lease Wear & Tear	<input type="checkbox"/> Deal Unwound/Flat (New Buyer's Order or Letter from Lienholder)
<input type="checkbox"/> Theft Protection	<input type="checkbox"/> Paid Off (Written Proof or Letter from Lienholder)
<input type="checkbox"/> Tire & Wheel Protection	<input type="checkbox"/> Repossession (Repossession Letter from Lienholder)
<input type="checkbox"/> Vehicle Service Contract	<input type="checkbox"/> Total Loss (Total Loss Notice from Insurer)
<input type="checkbox"/> Other: _____	<input type="checkbox"/> Trade (Written Proof or Odometer Statement) <input type="checkbox"/> Other _____

Registered Customer's Name _____		Daytime Telephone Number _____	
Address _____			
City _____	State _____	Zip _____	
Selling Dealer Name _____			
Last 7 Digits of Vehicle Identification Number _____			
Contract Purchase Date _____		Cancellation/Repossession Date _____	
Year _____	Make _____	Model _____	Vehicle Identification Number _____
Lienholder _____			
Term of Contract _____	Months in Effect _____	Retail Premium \$ _____	
VSC's only (Proof of Odometer Required):		Odometer Reading on Purchase Date _____	Odometer Reading on Cancellation Date _____

I hereby request cancellation of my contract in accordance with the terms & conditions of my agreement. I understand I relinquish all rights and provisions.

Registered Customer's Signature _____	Date _____
Dealer's Authorized Representative Signature _____	Date _____

ALL REQUESTS, EXCEPT REPOSSESSION, REQUIRE THE SIGNATURE OF THE REGISTERED CUSTOMER.

Notes: