

GAP Waiver Claim Form

To initiate a claim on your covered vehicle, we ask that you please complete the following information to help efficiently process your claim. In addition to the information below, please be certain to forward all required documentation noted on the back of your GAP Waiver Addendum. For your convenience, we have included a list of all the required documents and how to obtain them on the reverse side of this Claim Form.

Last Name, First Name <i>required</i>		Date of Total Loss	Mileage at Total Loss
Current Mailing Address <i>required</i>			
Home Phone	Cell Phone	E-mail	
Year/Make/Model <i>required</i>		Model Type: (e.g., LS, SLT, XE, SLE, etc.)	
VIN (Vehicle Identification Number) <i>required</i>			

FINANCE/LEASING COMPANY

Company Name		Account #	
Address	City	State	ZIP
Phone			

PRIMARY INSURANCE CARRIER

Company Name	Adjuster Name	Phone
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In the event of a claim, you must provide to us within 60 days from the date of loss the following legible documentation before any claim under this Waiver Addendum can be processed. Our goal is to assist you in processing your claim as quickly as possible. Any documentation submitted after 90 days from the date of loss will VOID your coverage. Commercial vehicles or private vehicles used for hire are excluded from coverage. This GAP Deficiency Waiver Addendum is not insurance and may not cover the entire balance owed by you to your lender. Once all required documents are received, processing can take up to thirty (30) days. It is your responsibility to maintain your monthly payments with your lender while your claim is being reviewed.

Please be aware that it is your responsibility to collect the required documents and submit to our office using one of the following methods 1) return receipt requested Email; 2) registered or certified mail; or 3) recognized overnight courier service. If you choose to submit your claim by FAX, you must receive a return receipt from us acknowledging your documents have been received. We strongly suggest that you enlist the assistance of your dealer, lender and primary insurance carrier to assist you in obtaining the required documents in order to file your claim prior to the document deadline date.

Please list any options equipped on your vehicle at the time of delivery:

Other: *(please list any specialty packages or options not listed above)*

Customer Signature	Date
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Include this form with your submission and email to claims@nationwarranty.com or fax to 954-340-7465.



GAP Waiver Submittal Instructions

PLEASE FORWARD THE FOLLOWING DOCUMENTATION TO NWC IN ORDER TO PROCESS YOUR CLAIM; ANY ONE DOCUMENT WILL START A CLAIM. ANY MISSING DOCUMENTS WILL SUSPEND YOUR CLAIM.

DOCUMENT	DESCRIPTION	OBTAIN FROM
Insurance Company Settlement Check	Photocopy or draft copy of the Insurance Company check(s).	Insurance Company
Insurance Company Settlement Statement	On Insurance Company letterhead with Adjuster name and telephone number. Includes date of loss, cause of loss, miles at date of loss, Actual Cash value, applicable taxes and tag fees, deductible amount and final settlement figure.	Insurance Company
Insurance Company Settlement Evaluation	Full Insurance Evaluation Report showing how the insurance company determined the Actual Cash Value of the vehicle. Must include any options on the vehicle and mileage at the date of loss.	Insurance Company
Complete Payment History Record and Payoff Statement	History of all transactions occurring since inception of loan. Includes payoff as well as a statement from the lienholder showing detailed payoff with per diem interest.	Lender
Police Report	Full, official Police Report or letter from insurance company stating the reason a police report was not filed.	Police Department or Insurance Company
GAP Contract	Photocopy of GAP Loan/Lease Deficiency Waiver Addendum (front and back).	Dealership or Lender
Loan/Lease Contract	Photocopy of front of Loan Contract or Lease Agreement. Includes mileage at date of purchase.	Dealership or Lender
MSRP (new vehicles only)	Manufacturer's suggested retail price located on the window sticker and the invoice.	Dealership
Completed Claim Form	GAP Protection Claim Form	Administrator
Buyer's Order/Purchase Order	Photocopy of front of Buyer's Order/Purchase Order (not applicable in CA).	Dealership
Proof of Refund Amount or Expiration of any Cancelable Items	If a Refund: Copy of the Contract and check copy or statement of dollar amount of refund on dealer letterhead. If Expired: Copy of Contract and substantiation of vehicle mileage (mileage expiration).	Dealership

Please note, under Claim Requirements on the reverse side of the GAP Deficiency Waiver Addendum: Your claim is time sensitive. Please refer to your Gap Deficiency Waiver Addendum regarding the time required to submit your claim documents. Failure to provide the documentation within the specified time frame may VOID the protection.

Please send all documentation to:

Mailing Address:

NWC
5571 N University Drive, Suite 201
Coral Springs, FL 33067

Fax Number:

954-340-7465

Email Address:

claims@nationwarranty.com

For questions or further assistance, please contact the Claims Department at 888-697-7896.

