

Customer Signature

VEHICLE SERVICE CONTRACT CANCELLATION REQUEST

Contract Number	Effective Dat			tive Date	Date Today's Date		
Customer					Phone		
Street							
City			State	9	Zip		
Issuing Dealer					Phone		
Street							
City	State			3	Zip		
Lienholder		VIN		Vehicle Year	Make	Model	
DATE	TIME	CALCUL	ATION	MILEAG	. _	MILEAGE	
Date of Contract Cancellation	Year	Month	Day	Odometer Mileage at Date of Ca		CALCULATION Miles	
Date Contract Purchased	Year	Month	Day	Odometer Mileage at Time of Co	ontract Purchase	Miles	
☐ Cancellation requested by Customer ☐ Vehicle sale or trade-in							
☐ Cancellation due to vehicle repossession (check will be made payable to Lienholder if evidence of repossession is included).							
I understand that all refunds for cancellations will be determined by the provisions in the Contract issued to me. Refunds due will be paid by the seller of the Vehicle Service Contract.							

Mail to: Program Administrator Lockbox 734398 Dallas, TX 75373-4398 619-228-0100 • Fax 619-321-0162 www.myameriplus.com

Sales Representative Signature

Date

Date