

Cancellation Request

To Be Completed by Selling Dealership	Today's Date:
Check one or more boxes: □ VSC □ T&W □ GA	AP .
Contract/Waiver #	-
Selling Dealer #	VIN
Selling Dealer	Customer's Name
Address	Cancellation Refund Amount \$
City, State, Zip	This is a quote only. The actual cancellation amount will be determined upor receipt of fully completed Cancellation Request Form.
Selling Dealer Signature	Lienholder
Cancellation Mileage	*Cancellation Date
	Month/Day/Year
☐ Total Loss (does not apply to GAP unless GAP Elite was purchased) Attach statement of total loss from insurance company or lienholder ☐ Repossession ☐ Attach proof of repossession from lienholder	Customer Request Obtain customer signature or attach signed customer correspondence Other/Flat Cancel Explain below and attach documentation (required for flat cancels outside guidelines)
Explanation (mandatory for flat cancellation):	
CANCELLATI	ION DISCLOSURE
 A cancellation of a financed product will not lower your at the time of this cancellation, please provide us docum. There may be a fee for cancellation (please refer to your Your cancellation refund will be calculated based on the cancellations will be calculated based on the lesser of: u remaining on the contract term (vehicle service contract according to the terms stated in the waiver addendum (Calculations will then be reduced by cancellation fees if By canceling your mechanical breakdown vehicle service responsibility and no other benefits accorded under the service contract, all time will be your responsibility. By canceling a GAP waiver, the lender will not be response the event of a total loss to your vehicle. By signing below, I/we have read and fully understand that the cancellation will be processed as stated above, benefits afforded under the coverage being canceled will to process cancellation.) 	recontract for details). e contract terms and conditions, but generally mused portion of time or unused portion of miles (b); time remaining on the contract term (tire and wheel); GAP) and any applicable state provisions. Each of these there are any stated in your contract. (ce contract, all mechanical repairs will be your service contract will be available. (re or wheel repairs, including any necessary replacement consible to waive any amount remaining on your loan in the cancellation disclosure statements as outlined and I/we further understand that from this date forward, no
	oration or CNA National Warranty Corporation – Florida within 10 days of listed as an additional payee unless proof of loan payoff is submitted.
Customer's Signature Date	Customer's e-mail address (required for Florida)
CNA National Warranty Corporation • Attn: Cancellatio	ons Dept. • P. O. Box 2840 • Scottsdale, Arizona 85252-2840

800-345-0191, extension 412

Email: cancellations@cnanational.com; Fax: 888-694-4166