



4111 S Memorial
Phone (918)526-2500 Fax (918)526-2551

CANCELLATION REQUEST

Today's Date _____

CHECK ALL THAT APPLY: Warranty Maintenance Triple Care Credit Life GAP*

I hereby wish to cancel the above marked products on the following listed vehicle that is owned by the undersigned.

Cancel Date _____ Purchase date (Month & Year) _____

Year, Make, Model of vehicle _____ Current Mileage _____

Vehicle Identification Number _____

Location of Purchase: Bill Knight Ford – Tulsa Bill Knight Lincoln Volvo Bill Knight Ford Stillwater

Lienholder on vehicle _____

(Name) (If paid off, please provide confirmation)

(Address)

(Account Number or Social Security Number)

*** For Gap ONLY:** I understand and accept that this cancellation will totally VOID all protection provided by the GAP addendum for the entire term of the loan and I will have no recourse or claim against any of the parties named in the GAP addendum in the event of a future total loss or unrecovered theft to my vehicle. ____ Please initial here

Upon payment of the cancellation, I hereby release and forever discharge Knight Automotive Group and its employees from any and all claims, demands, and actions which I now have or may hereafter acquire in connection with this cancellation.

Cancellations may take 6 to 8 weeks. To expedite refund, please provide lien release or proof of payoff to lien holder. Proceeds will be refunded upon receipt from the warranty or insurance company. If your loan is not paid in full all cancellation proceeds will be forwarded to the lien holder. **Please initial here** _____

- Reason For Cancellation Customer Request (provide lien holder information or copy of payoff)
- Stolen Vehicle (Attach police report)
- Repossession (Attach repo papers)
- Totaled/Wrecked (Attach letter from insurance)
- Trade-in (MUST attach odometer statement)

Customer Name _____

Address _____

City, State, Zip _____

Daytime phone # _____

Signature _____

Failure to have this form COMPLETED with required documentation will delay any refunds.

Office Use Only: Finance Representative _____ Down payment on trade (must have quote attached)
Customer # _____ New Deal # _____ Stock _____