

REPAIR GUARD™ Cancellation Request Form



Please fill out this cancellation request completely. Once you have completed this form, fax to:

1.866.449.3252

CUSTOMER INFORMATION:

Customer's Full Name _____

Phone No. _____

Address _____

City, State, Zip _____

VIN _____

REPAIR GUARD™ Invoice # _____

ORIGINAL FACILITY INFORMATION:

Facility Name _____

Facility Phone No. _____

Return Fax No. _____

Please Print Your First and Last Name

Name of Facility Contact for this Cancellation _____

Facility Contact's Signature _____ Date _____

Reason for Cancellation _____

REPAIR GUARD™ Contract Date _____ Effective Date of Cancellation _____

Customer Signature _____ Date _____

Please write "CANCELLED" across the original invoice where REPAIR GUARD™ was purchased.

This Cancellation Request Form WILL NOT be accepted unless it is signed by the customer and fully completed.

After processing this request, Sonsio will provide a Cancellation Approval Form confirming the refund amounts.

Do not deduct the amount of the being issued to the facility by the Program Administrator from any future remittances for the REPAIR GUARD™ Program. The facility will receive a check for this amount from the Program Administrator.

The refund owed to the customer will be determined by the Program Administrator and paid by the original facility within 30 days of the cancellation request date. If you are having a problem obtaining your refund from the original facility, email RepairGuard@sonsio.com or call 1-833-863-0010.

CANCELLATION OF THE REPAIR GUARD™ CONTRACT RELEASES SONSIO INTERNATIONAL, INC. AND ITS AFFILIATES FROM ALL OBLIGATIONS AND LIABILITY UNDER THE REPAIR GUARD™ PROGRAM AS IT RELATES TO THE ABOVE NAMED CUSTOMER.

If you have any questions, please contact 1.800.863.0010.

Thank you for your business.