

Integrated Warranty Systems Cancellation Form

Customer Name: _____

Address: _____

City: _____

Phone Number: (_____) _____

IWS Warranty Contract #: _____

Product: _____ **Make:** _____

Model: _____ **Serial #:** _____

Reason for Cancellation: _____

Customer Signature: _____

Selling Dealer: _____

Dealer Signature: _____

* An administration fee applies to all contracts
* A pro-rated refund will be credited to the selling dealer