



## CANCELLATION REQUEST FORM

Check all that apply:

- VEHICLE SERVICE CONTRACT
- GAP ADDENDUM
- TIRE & WHEEL PROTECTION CONTRACT
- TOTAL PACKAGE PROTECTION CONTRACT
- OEM TECHNOLOGY
- POWERSPORTS CARE
- OTHER: \_\_\_\_\_

Contract Holder: \_\_\_\_\_ Contract #: \_\_\_\_\_ Purchase Date: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone #: \_\_\_\_\_ Email: \_\_\_\_\_

Vehicle Year: \_\_\_\_\_ Make: \_\_\_\_\_ Model: \_\_\_\_\_ VIN: \_\_\_\_\_

Selling Dealer: \_\_\_\_\_ Address: \_\_\_\_\_

Lienholder: \_\_\_\_\_ Loan Account #: \_\_\_\_\_

Lienholder Address: \_\_\_\_\_

REASON FOR CANCELLATION			
<input type="checkbox"/> Customer Request	<input type="checkbox"/> Vehicle Traded	<input type="checkbox"/> Vehicle Totaled	<input type="checkbox"/> Other: _____
<input type="checkbox"/> Vehicle Repossessed (attach proof)	<input type="checkbox"/> Loan Paid in Full (attach proof)	<input type="checkbox"/> Dealer Unwind	
<b>Vehicle Mileage at Cancellation</b> VSC only (attach proof) _____		<b>Requested Cancellation Date:</b> _____ <i>Form must be received within 30 days of requested cancel date</i>	

Customer Signature \_\_\_\_\_ Date \_\_\_\_\_

Dealership Signature (VSC only) \_\_\_\_\_ Date \_\_\_\_\_

To cancel your MBPI Contract, complete this form and return to:

[cancellations@mbpnetwork.com](mailto:cancellations@mbpnetwork.com)

MBPI/VPI

Attention: Cancellation Department

250 NE Mulberry | Lee's Summit, MO 64086

Phone: 800-325-7484 | Fax: 816-347-9265

[www.mpbnetwork.com](http://www.mpbnetwork.com)

For Administrator Use Only	
Cancel Fee:	_____
Refund Percentage:	_____
Processed Date:	_____
Refund Amount:	_____
Check Number:	_____
MBPI/VPI Signature:	_____