



GAP ADDENDUM CANCELLATION FORM

Dealer/Creditor's Name			Financial Institution/Lender's Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
Dealer/Creditor's Contact Name			Dealer/Creditor's Phone Number		

Borrower's Name			Addendum Number (include all letters & numbers)		
Street Address			Addendum Effective Date	Cancel Effective Date	
City	State	Zip	Borrower's Cost for Addendum		

Year	Make	Model	Vehicle identification Number (VIN)
------	------	-------	-------------------------------------

This form must be completely filled out for cancellation processing.

CANCELLATION REASON - *Paperwork required for processing:*

- Contract Payoff** – Proof of pay off from the Financial Institution/Lender on Addendum.
- Repossession** – Repossession letter from Financial institution/Lender on Addendum.
- Trade** – Odometer Statement or signed Cancellation form.
- Borrower Request** – GAP Addendum Cancellation form or cancel letter with Borrower's signature.

REQUEST FOR CANCELLATION: I hereby request the cancellation of the FINANCIAL GAP ADDENDUM. In consideration of this cancellation, I do hereby release and forever discharge the Lender/Dealer and I agree to hold them harmless from any and all claims, demands, action and payment on this Addendum, except for prorated refund of the charge.

Cancellation Fee*: \$50
 * Excludes FMCC (GGF150-M-001, REV. 06/10)

Borrower's Signature: _____ Date: _____

GENESIS PRODUCTS ADMINISTRATOR
 P.O. Box 20667
 Oklahoma City, OK 73156

FAX: 405-418-0061