

***Requests Received - The cancellation refund will be based on the date we receive written notification of the cancellation request.**

A cancellation refund check will be made payable and issued to you if no lien exists. Whenever a lien exists, the cancellation refund check will be made payable and issued to the lienholder.

CANCELLATION FEES

(Applies to the state where the Plan was purchased)

STATE	AMOUNT
Alabama	\$25 Administration Fee.
Arizona	\$25 Administration Fee.
California	\$25 or 10% of the Contract Cost, whichever is less.
Florida	5% of the refund.
Georgia	10% of the unearned pro-rata premium - no Administration Fee.
Hawaii	\$50 Administration Fee.
Illinois	\$50 or 10% of the Contract Cost, whichever is less.
Iowa	\$50 or 10% of the Contract Cost, whichever is less.
Louisiana	\$50 Administration Fee.
Mississippi	\$75 or 10% of the Contract Cost, whichever is less.
Missouri	\$50 Administration Fee.
Nevada	\$25 Administration Fee.
New Hampshire	None
New York	\$50 Administration Fee.
North Carolina	\$50 or 10% of the pro-rata refund amount, whichever is less.
Oklahoma	10% of the unearned pro-rata premium not to exceed \$75. If we cancel, 100% of the unearned pro-rata premium will be refunded.
Puerto Rico	None
Texas	\$50 Administration Fee.
Washington	\$25 Administration Fee.
Wisconsin	\$75 or 10% of the Contract Cost, whichever is less.
All Others	\$75 Administration Fee.

TRANSFER POLICY: The original purchaser may authorize transfer of coverage, provided the Plan has not been canceled. Remaining Plan coverage may be transferred to the first subsequent purchaser of the vehicle AT TIME OF VEHICLE SALE ONLY. Thereafter, the Plan is non-transferable and non-cancelable.

To transfer this service contract, complete the transfer form. Be sure to include your signature. This means you are authorizing transfer of Plan coverage to the new owner. Transfer requests will not be processed: (a) without the signature of the owner for whom these Plan Provisions were originally issued; or (b) if received after 60 days from the date of vehicle ownership change.

You may take your Plan with the completed transfer form and transfer fee, if applicable, to a Dealer to process the Plan transfer or mail to the following. Please be advised that the mail in process is a longer process.

**Vehicle Protection
Transfer Department
P.O. Box 2700
Troy, MI 48007-2700**

The transfer fee is as follows:

TRANSFER FEES
(Applies to the state where the Plan was purchased)

<u>STATE</u>	<u>AMOUNT</u>
Florida	\$40
New Hampshire	None
Puerto Rico	None
All others	\$100

- Any Plan financed on the Vehicle Protection Payment Plan is NOT transferable until the Plan is paid in full.
- Upon acceptance by us, you will be mailed a new set of plan provisions in your name confirming your transfer request.

**NEED HELP OR ASSISTANCE WITH YOUR PLAN?
IS YOUR ADDRESS UP-TO-DATE?**

**PLEASE ACCESS OUR SELF-SERVICE WEBSITE FOR PLAN COVERAGE AND FREQUENTLY ASKED
QUESTIONS AT:**

www.moparvehicleprotection.com

**You can also email your question to:
Mopar Vehicle Protection
MVPMiscellaneous@fcagroup.com**

Note: All requests must contain your Name, Plan Number, and Vehicle Identification Number.

Toll-Free Telephone Assistance is Available
8:00 a.m. to 8:00 p.m. Eastern Time Monday through Friday
9:00 a.m. to 5:00 p.m. Eastern Time Saturday
1-800-521-9922 (in USA)
1-800-465-2001 (in Canada)

For 24-Hour Roadside Assistance Coverage
*Services dependent upon coverage purchased.
1-888-517-4500

TRANSFER FORM: SEE TRANSFER POLICY FOR DETAILS			
PLAN NO.	VEHICLE IDENTIFICATION NO.	OPTION CODE(S)	
FORM MUST BE FILLED OUT COMPLETELY	CURRENT ODOMETER READING (OMIT TENTHS)	CHECK MILES OR KILOMETERS <input type="checkbox"/> MILES <input type="checkbox"/> KILOMETERS	
TRANSFER	TRANSFER THE REMAINING COVERAGE FOR THE LISTED VEHICLE TO THE PERSON NAMED BELOW. ENCLOSED IS A CHECK OR MONEY ORDER FOR THE TRANSFER FEE AMOUNT.		
TRANSFER FEE AMOUNT *	CHECK OR MONEY ORDER ENCLOSED (PAYABLE TO FCA US LLC)	<input type="checkbox"/> VISA <input type="checkbox"/> MASTER CARD	CREDIT CARD NO. EXPIRATION DATE
NAME (PLEASE PRINT)		AREA CODE & TELEPHONE NO.	
ADDRESS		VEHICLE PURCHASER'S SIGNATURE	DATE OF VEHICLE PURCHASE
CITY, STATE & ZIP		VEHICLE SELLER'S SIGNATURE	

Notes:

Certain Options are not eligible for Transfer. Please refer to the "Transfer Policy" paragraph for "each Plan Option" to verify transfer eligibility.

Transfer fee applies for each option being transferred.

Please print the "Option Code(s) that you want transferred to a new owner in the "Option Code" space provided above. Option Code(s) can be found on the first page of your Plan below Option Description.