



Gap Protection  
Cancellation Request Form

Today's Date: \_\_\_\_\_

Cancellation Date: \_\_\_\_\_

Dealership Name: \_\_\_\_\_

Dealership Address: \_\_\_\_\_  
\_\_\_\_\_

Dealership Contact: \_\_\_\_\_

Phone Number: \_\_\_\_\_ **FAX NUMBER \*** \_\_\_\_\_

Customer Name: \_\_\_\_\_

Customer Address: \_\_\_\_\_  
\_\_\_\_\_

Vehicle; Year, Make & Model: \_\_\_\_\_

Purchase Date: \_\_\_\_\_ Gap Purchase Price: \_\_\_\_\_

Lease     Loan    Lienholder: \_\_\_\_\_

Reason for Cancellation: \_\_\_\_\_  
\_\_\_\_\_

**TO ENSURE PROMPT PROCESSING PLEASE INCLUDE LEGIBLE COPIES OF THE FOLLOWING AND FORWARD TO:  
TORQUE GROUP LLC 41 West Division Street Suite C Evansville, IN 47710. Or Fax to 866-434-9922**

- Written request for cancellation, signed and dated by the customer or representative from dealership or lienholder.
- Complete copy of original GAP contract.

\_\_\_\_\_  
Signature

**PLEASE CHECK ONE:**    **CUSTOMER**      
**DEALERSHIP**      
**LIENHOLDER**   

**Please Note** – Cancellations requested after the first 30 days of purchase are subject to a \$50.00 cancellation fee and will be refunded by the rule of 78's unless stated otherwise on the original GAP waiver.