

## TRANSFER APPLICATION

|                   |      |       |                               |                  |                  |
|-------------------|------|-------|-------------------------------|------------------|------------------|
| Year              | Make | Model | Vehicle Identification Number | Mileage at Issue | Transfer Mileage |
| Agreement Number  |      |       | Transfer Date/Date of Sale    | Today's Date     |                  |
| Transfer From     |      |       | Transfer To                   |                  |                  |
| Name:             |      |       | Name:                         |                  |                  |
| Address:          |      |       | Address:                      |                  |                  |
| City State Zip:   |      |       | City State Zip:               |                  |                  |
| Telephone Number: |      |       | Telephone Number:             |                  |                  |

**ATTENTION ORIGINAL AGREEMENT HOLDER:**

Your signature on this transfer application verifies that you approve of this request to transfer your service agreement. You signature verifies that you have enclosed proof of required service performed, proof of transfer of manufacturer's warranty (if applicable), a Federal Odometer Statement or a copy of the Title or Notarized Affidavit verifying mileage at date of transfer, a used Vehicle Inspection Check Sheet performed by a licensed repair facility along with your check payable to National Auto Care for transfer fees. Submission must be made within thirty (30) days of transfer date.

**ATTENTION APPLICANT**

Your signature on this transfer application verifies that you agree to the terms, conditions and exclusions of this agreement and the service agreement being transferred. That approval of this transfer is at the discretion of the Administrator and may be declined for any reason.

\_\_\_\_\_  
Signature of Original Agreement Holder

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date

This agreement may only be transferred one (1) time. Transfer fee is \$100 unless otherwise stated in the agreement.

- Transfer Application Completed
- Vehicle Inspection Check Sheet Completed
- Signature of Original Agreement Holder and Applicant
- Check Payable to National Auto Care
- Proof of required service performed
- Transfer Manufacturer Warranty
- Copy of Title or Federal Odometer or Notarized Affidavit
- Submitted within 30 days from date of sale

**Mail To:**  
National Auto Care  
575 Westar Crossing  
Westerville OH 43082