RMA

Attn: RMA – Coverage Administrators (Loans)
Request to Cancel Coverage
Fax: (416) 408-4462
Tel: 1- (888) 307-7443

_____
(date)

_____
(name of business request was sent from, if applicable)

situated at:

_____
(street no.) (street name)   (city/town)   (province) (postal code)

Please cancel my coverage on _____ .
(certificate no.)

debtor name: _____

codebtor name: _____

home address: _____

_____

_____

Please select your request of the 3 below:

☐ Insured request to be rec'd by RMA within 30 days of cvg. effective date   ☐ Any day request   ☐ Loan paid-out on _____ & copy of payout **(date)** receipt enclosed as proof

Loan will remain actively in repayment?
►Any refund cheque will be issued to your creditor to be applied towards your loan account because this lender had originally financed the premium for your coverage.

Loan paid-out?
►Your enclosed payout receipt authorises us to issue a refund cheque to you directly, and for us to forward it to your current postal address, however some customers would like the refund to be applied towards a 'next' purchase.

If your loan has been paid-out, please select 1 of the 2 payment instructions below:

☐ Please issue and send the cheque to us/me   ☐ Please issue and send the cheque to the dealership listed-above to apply the refund towards a 'next' purchase

debtor signature: _____

codebtor signature: _____

170 University Ave., Suite 500, Toronto, ON M5H 3B3