

Aftercare

905 Hyde Court
Costa Mesa, CA 92626-6900
(800) 3 **A-f-t-e-r-care** or (800) 832-3237
(714) 546-6615
Fax (714) 546-0849

TRANSFER APPLICATION

Date _____

CONTRACT INFORMATION

Contract Number _____ Date Vehicle Last Serviced _____
Date Vehicle Sold to New Owner _____ Odometer Reading _____
Year _____ Manufacturer _____
Model _____ VIN _____

DEALERSHIP INFORMATION

Dealership Name _____ Dealer # _____
Address _____ Phone # _____
City _____ State _____ Zip _____

TRANSFER INFORMATION

BUYER (NEW OWNER)	SELLER (ORIGINAL OWNER)
Name _____	Name _____
Address _____	Address _____
City _____	City _____
State _____ Zip _____	State _____ Zip _____
Home Phone _____	Home Phone _____
Work Phone _____	Work Phone _____

INSTRUCTIONS:

- Complete this transfer and obtain the Dealer authorization and signature.
- Send: this form, ALL REQUIRED MAINTENANCE RECORDS AND RECEIPTS and a check for \$25 (payable to Aftercare) to the address listed in the top left hand corner of this form, WITHIN 15 DAYS OF THE VEHICLE RESALE DATE. (Service records must demonstrate that the vehicle has been maintained as recommended by the manufacturer.)
- The vehicle must be in proper working order at the time of transfer. Signature of Dealer certifies visual inspection of vehicle and confirmation of it being in working order.
- **Transfer forms received without maintenance records will not be accepted.**

SIGNATURES:

Buyer (New Owner) _____ Date _____
Seller (Original Owner) _____ Date _____
Dealer _____ Date _____

FOR USE BY **Aftercare**

Date received: _____ Resolution: _____
Correspondence: _____
