



GS 85941

GAP WAIVER ADDENDUM DECLARATIONS

COLLATERAL INFORMATION

Vehicle Sale Price (Max. \$50,000)	Finance Contract/Addendum Effective Date	Term: (Months) (max. 60 months)	
Year:	Make:	Model:	Mileage:
VIN#:	Amount Financed:		

DEALER / LENDER INFORMATION

Name:	Dealer Account #:	Phone:	
Address:			
City:	State:	Zip:	

GAP ADDENDUM CHARGE \$ _____

ASSIGNED LENDING INSTITUTION

Name:	Lender Account #:	Phone:	
Address:			
City:	State:	Zip:	

CUSTOMER INFORMATION

Name:	Phone:	
Address:		
City:	State:	Zip:

Installment Sales Contract

I RECEIVED, READ AND UNDERSTAND THE PAGE CONTAINING IMPORTANT DISCLOSURES AS WELL AS THE GAP WAIVER ADDENDUM. I VOLUNTARILY ELECT TO PURCHASE THIS GAP WAIVER ADDENDUM FOR THE CHARGE STATED ABOVE AND AGREE TO BE BOUND BY THE TERMS

IN NORTH CAROLINA: Neither the extension of credit, the term of credit, nor the term of a related vehicle sale or lease may be conditioned upon the purchase of a Guaranteed Asset Protection Waiver.

BORROWER DATE

LENDER (DEALER) DATE

BORROWER DATE

I voluntarily reject purchase of this GAP Waiver Addendum.

BORROWER DATE