

TRANSFER REQUEST FORM

EXCESS WEAR AND USE PROTECTION PLAN NUMBER		ORIGINAL ISSUE DATE	TRANSFER DATE
YEAR	MAKE	MODEL	
VEHICLE IDENTIFICATION NUMBER		ODOMETER AT DATE OF ISSUE KM	ODOMETER AT DATE OF TRANSFER KM

CURRENT LESSEE 1: TRANSFEROR 1

NAME	
ADDRESS	
CITY / PROVINCE / POSTAL CODE	
HOME PHONE ()	BUSINESS PHONE ()
EMAIL	
ORIGINAL ISSUING LESSOR / DEALER	

CURRENT LESSEE 2: TRANSFEROR 2

NAME	
ADDRESS	
CITY / PROVINCE / POSTAL CODE	
HOME PHONE ()	BUSINESS PHONE ()
EMAIL	
ORIGINAL ISSUING LESSOR / DEALER	

NEW LESSEE 1: TRANSFEREE 1

NAME	
ADDRESS	
CITY / PROVINCE / POSTAL CODE	
HOME PHONE ()	BUSINESS PHONE ()
EMAIL	

NEW LESSEE 2: TRANSFEREE 2

NAME	
ADDRESS	
CITY / PROVINCE / POSTAL CODE	
HOME PHONE ()	BUSINESS PHONE ()
EMAIL	

ATTENTION TRANSFEREE(s): Waiver benefits will not be effective until approval is confirmed in writing by the Administrator.

ATTENTION TRANSFEROR(s): The following **must be submitted to the Administrator within 30 days** of the lease transfer to a subsequent individual lessee:

- 1) The transfer request form (must be fully completed, no blank fields).
- 2) A \$100 fee (plus applicable tax) applies to Transfer Requests made payable to LGM Financial Services, except where prohibited by law (No fee in Quebec).
 - Retailers in BC, Alberta, Saskatchewan and Manitoba are required to remit GST
 - Retailers in Ontario and Atlantic Canada provinces are required to remit HST
- 3) A copy of the official Vehicle Lease Transfer document signed between the parties (VEHICLE REGISTRATION)

Payment Method: Cheque Visa M/C Card Card# _____
 Expire Date: ____ / ____ / ____

Make cheque payable to LGM Financial Services and forward all requested information to:

LGM Financial Services Inc.
 #142 - 757 West Hastings Street
 Vancouver, BC V6C 1A1

For further information, please contact 1-866-287-6200 or service@lqm.ca.



Transferee hereby agrees to the terms and conditions outlined within the Lease Agreement and Lease Excess Wear Protection Addendum, including but not limited to the use of personal information.

_____ Signature of Transferor 1 (Lessee 1)	_____ Date	_____ Signature of Transferor 2 (Lessee 2)	_____ Date
_____ Signature of Transferee 1 (Lessee 1)	_____ Date	_____ Signature of Transferee 2 (Lessee 2)	_____ Date
_____ Signature of Lessor / Retailer	_____ Date		