

TRANSFER REQUEST FORM

CONTRACT NUMBER			ORIGINAL ISSUE DATE		TRANSFER DATE		
YEAR	MAKE Hyundai		MODEL				
		ODOMETER AT DATE OF ISSUE KM		ODOMETER AT DATE OF TRANSFER KM			
Transfer from:			Т	ansfer to:			
NAME			1	NAME			
ADDRESS			7	ADDRESS			
CITY / PROVINCE / POSTAL CODE				CITY / PROVINCE / POSTAL CODE			
HOME PHONE BUSINESS PHONE			-	HOME PHONE BUSINESS PHONE			
() ())	()			
EWAIL				MAIL			
ORIGINAL ISSUING DEALER							
ATTENTION T	ay only be transferred on RANSFEREE: Coverage	will not be	effective until a	proval is confir		e Administrator.	
☐ I have obta	ained the vehicle's record	s of mainte	nance and repa	ir history from th	ne transferor.		
	RANSFEROR: The follo subsequent individual pu		be submitted to	o the Administi	ator within 30 day	s of the change o	
2) The name 3) A \$100 fee where prol • Deale	the Contract Registration, address and contact nur e (plus applicable tax) applibited by law. rs in BC, Alberta, Saskato	mber of the plies to Tra	nsfer Requests d Manitoba are	made payable	to Hyundai Auto Ca : GST	e at time of sale. anada Corp., excep	
	rs in Ontario and Atlantic the official Transfer of Ow						
Payment Metho	od: Cheque [□Visa	□М/С Card	Card #: Expiry Da	te:		
Make cheque p	payable to Hyundai Auto (Canada Co	rp. and forward	all requested in	formation to:		
	aid Maintenance stings Street, Suite 400 : V6E 0C3						
For further info	rmation please contact 1-	855-506-61	160.				
	eby agrees to the terms a onal information.	and conditio	ns outlined with	in the transferre	ed contract, includir	ng but not limited to	
Signature of 0	 Driginal Owner	Date		gnature of New	 Owner	 Date	