



CareGard Warranty Services, Inc.

Dealer Report and Remittance Form



Dealer Name: _____

Date: _____

Dealer #: _____

Please Select
Appropriate
Product

TireGARD Maintenance CareGARD VSC Pre-Owned

Phone: _____

EtchGARD ComfortGARD GAPGARD Limited Warranty

Please use one product per form

SecureGARD

#	VIN Last Six	Customer Name	Year/Make	Plan Code	Contract Date	Dealer Cost
1						
2						
3						
4						
5						
6						
7						
8						
9						
10						
11						
12						
13						
14						
15						
16						
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21						
22						
23						
24						
25						

Program Administrator
CareGard Warranty Services, Inc.
 1900 Champagne Blvd
 Grapevine, TX 76051
 (800) 856-0990
 (817) 552-4199 Fax

Page Total

\$ _____

Please make checks payable to: CareGard Warranty Services, Inc.

Mail this report, administration copies and check to: 1900 Champagne Blvd. Grapevine, TX 76051