

CUSTOMIZE YOUR OWN PERSONAL PROTECTION



- Backed by Ford
- Rental Reimbursement
- Low Deductible
- Towing Reimbursement
- Coverage Options



- Covers all required factory maintenance
- Six wear items covered
- Factory Certified Technicians
- Nationwide Coverage
- Electronic Records



Window Etching protects our inventory from theft and reduces our Insurance Premiums. We're going to transfer their codes from Davies Ford to YOUR NAME. Your Personal Identification Number is etched into all major glass windows on your vehicle. You will receive \$2,500 plus other benefits if your vehicle is stolen and not recovered



- Ford Motor Company does not cover your tires.
- The Tire Manufacturer does not cover road hazards.
- Expand your tire warranty coverage, because you never know when you're going to hit a pothole, run over a nail, or hit a curb!

OUR SENTINEL WARRANTY PAYS THE COST OF:

- FLAT TIRE REPAIR
- TIRE REPLACEMENT IF NON-REPAIRABLE
- TIRE MOUNTING & WHEEL BALANCING
- VALVE STEM REPLACEMENT
- LABOR CHARGES
- WHEEL REPLACEMENT IF NON-REPAIRABLE



Your Car Insurance Does Not Cover Everything!

Insurance companies do not consider your loan balance when settling a claim. YOU are responsible for the loan balance.



Loan Amount: \$25,000	
Term: 60 months	
Loss Date: 36 months	
Loan/Lease Payoff	15,000
Insurance Settlement*	12,000
GAP	(3,000)
Insurance Deductible	(500)
Potential Out-of-Pocket Expense	(3,500)
GAPWise™ Payment to Lender	3,500
Out-of-Pocket Expense	
With GAPWise™	0

*Actual Cash Value of Vehicle



The Bank has made a provision to include these products in your Finance Contract:



Credit Life Protection pays off your loan balance in the event of your death or total or permanent disability. It also provides your estate with a clear title to your vehicle.



Disability Protection will make your payments when you are unable to work for a medical reason. 14 Day Retroactive.

Guest: _____ Date: _____

Vehicle: _____ Stock #: _____

APR/Term: _____ %/ _____ Vehicle Warranty: _____
(Time / Miles)

Balance: \$ _____
Payment: \$ _____*

* Base Payment assumes terms and conditions as per illustrated, subject to credit approval and may vary depending on financial eligibility. Other conditions and/or restrictions may apply.

Total Monthly Investment	\$ _____
TERM	_____
OPTION PRICE	_____

Accept Decline

Total Monthly Investment	\$ _____
TERM	_____
OPTION PRICE	_____

Accept Decline

Total Monthly Investment	\$ _____
TERM	_____
OPTION PRICE	_____

Accept Decline

This Plan and Financial Services Overview describes what these products generally include. Please obtain Product Agreements for actual elements, terms and details of each product offered. This form is used for illustration purposes only.

THE ABOVE OPTIONS HAVE BEEN EXPLAINED TO MY SATISFACTION BY THE FINANCIAL SERVICES MANAGER.

Guest Signature: _____

Financial Services Manager: _____