



Notice of Right to Cancel

Date: _____

You may CANCEL this transaction, without any penalty or obligation, within THREE BUSINESS DAYS from the above date. If you cancel, approval of your SHIP application will be null and void and will remain inactive until further notice. If you cancel, you must make available a formal written statement to the Community & Human Services Division in addition to the "Notice of Right to Cancel" reasons for discontinuing the SHIP Program. Mail or deliver a signed and dated copy of this cancellation notice, or any other written notice or telegram, to: _____ (Name of Applicant) at _____ (Address of Seller's Place of Business) NO LATER THAN MIDNIGHT OF _____ (Date) I HEREBY CANCEL THIS TRANSACTION. Buyer's Signature: _____ Date: _____ -

By signing this form, I _____ and _____ hereby understand my rights to cancel my application and the steps I need to take to cancel.

Signature

Date

Signature

Date

