# Arbitration Program for Ford Extended Service, Contracts, and Maintenance Plans Customers



## **Consumer Information**

NAME (	last,	first,	mid	dle)
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TO THE (last, mist, madie)		
STREET ADDRESS		CITY
STATE		ZIP
BEST DAYTIME NUMBER		EMAIL
Vehicle information	on	
MAKE		MODEL
YEAR	CURRENT MILEAGE	VEHICLE IDENTIFICATION NUMBER

## **Contract Information**

**DEALER WHO SOLD CONTRACT** 

DATE CONTRACT WAS PURCHASED

DEALERSHIP WHERE VEHICLE WAS PRESENTED FOR WARRANTY COVERAGE

### Other Information

DATE VEHICLE WAS PRESENTED FOR REPAIR AND MILEAGE

**DESIRED OUTCOME** (describe what you want done to resolve your concern)

# Vehicle Probelms (list primary problems first)

PROE	BLEM	SERVICING DEALER(S)	# OF REPAIR ATTEMPTS	LIST THE DATE, MILEAGE AND DAYS OUT OF SERVICE EACH REPAIR ATTEMPT	FOR EVICE

#### SUBMIT COMPLETED AND SIGNED FORM TO BBB NATIONAL PROGRAMS

Along with your completed form, please be sure to send all documents relevant to your dispute, including:

- ✓ Copies of all available repair orders
- ✓ Copy of vehicle registration
- ✓ Copy of your sales/lease agreement
- ✓ Any other documentation that supports your position

**VEHICLE OWNER'S SIGNATURE** (form must be signed by vehicle owner):

DATE:

By signing and submitting this form, I am requesting arbitration under the BBB National Programs Arbitration Rules for Ford Extended Service, Contracts, and Maintenance Plans Customers

#### RETURN THIS FORM VIA MAIL, EMAIL, OR FAX TO:

**BBB National Programs** 

ATTN: Ford Extended Service Plan

1676 International Drive, Suite 550 McLean, VA 22102

EMAIL: contactDR@bbbnp.org

FAX: 703-247-9700

