



DEALER REQUEST FOR ORDER CANCELLATION

*This Form MUST be faxed to 609-235-1003 two (2) hours prior to pick-up appointment or before 6:30 p.m. for morning deliveries for the order to be cancelled**

Dealer Name & # _____

Date Order Placed _____

ADC Order # _____

Model #(s) _____

Dealer Signature _____ **Date:** _____

***Cancellation fees are not applicable if received on a timely basis.**

Note: This form does not apply to Special Orders, as they cannot be cancelled.