



Records Research Document Services, LLC

6160 Warren Pkwy. Ste 100
Frisco, TX 75034

REFUND REQUEST FORM

www.cartitles.com
security@cartitles.com
256-448-4853

DESCRIBE YOUR REQUEST (Please Print Legibly)

Date of Request:

Purchase Date:

Transaction Amount:

Vehicle VIN:

First & Last Name:

Address:

Email:

Phone:

Please explain why you are requesting a refund:

Please attach supporting documentation with this form.

Return form by email to security@cartitles.com

If approved, refund will be made in conjunction with the cartitles.com guarantee.

All other terms and conditions of site apply.

Customer Signature: _____ Date: _____

For Department Use Only:

____ Approved Processed By: _____

____ Not Approved Processed Date: _____

Comments: _____
