



Bus: (416) 907-3579 Fax: 1-888-428-8541 E-mail: driversupport@marketyourcar.com

Mileage Submission Form

Personal & Contact Information First Name Middle Initial Last Name Client ID# Vehicle Information Year Make License Plate Model Milieage Information Odometer Reading: Date of Reading: ______ for the month of _____ I hearby certify that the information contained herin the form is correct and accurate to the best of my knowledge and ability, and that I have read the Terms & Conditions located onthe marketyourcar.com website. Signature Date