

SUBROGATION

In consideration of the payment of the claim of the undersigned by the Motor Vehicle Compensation Fund established by Regulation under the Motor Vehicle Dealers Act,

I/we _____
Please print full name(s) of claimant (s)

hereby discharge and forever release the said Fund from all further claims, demands and liability for the said loss and damage.

The said Fund is hereby subrogated in the place of, and to all rights of recovery, claims and demands of the undersigned against any person or organization, including:

Name of Dealership that you dealt with

to the extent of the payment made; and the said Fund is hereby authorized and empowered to sue, compromise, adjust or settle any action in my/our name(s) or otherwise, at the expense of the said Fund, to the extent of its interest in the monies paid as aforesaid to me/us.

I/we confirm that I/we have not received payment or reimbursement of the said claim from any other source that I/we have not released or discharged the said claim, or any part thereof, against any other person or corporation and covenant that I/we will furnish the Registrar of Motor Vehicle Dealers and Salespersons with all papers and information in my/our possession and execute such documents and do everything in my/our power necessary for proper litigation of the said claim.

I/we hereby execute this document

dated the _____ day of _____ 200 _____.

Signature

Address

NOTE: If the Fund fails to make payment of the claim, this document is null and void: