

OCCC Debt Cancellation Agreement (DCA) Submission Form	
Your First Name:	Your Last Name:
Your Company's Name (include full name and	d any d/b/a):
Your Address:	Your Phone/Fax Number(s):
	Phone:
	Fax:
Your Email Address:	Date Form Is Being Submitted: (mm/dd/yyyy)
Type of DCA: Chapter 345 (motorcycle, RV, Chapter 348 (motor vehicle) BOTH	ATV, snowmobile, camper, boat, personal watercraft and personal watercraft trailer)
Form Number (should uniquely identify the forn	n submitted): Date Form Was Last Revised: (mm/dd/yyyy)
A. Required Nonrefundable Filing Fee: \$250	for each submitted debt cancellation agreement
_	ne agreement, we encourage you to read the OCCC's advisory bulletin, Requiring Insurance" posted on our website.
Abode Acrobat (pdf) "clean" version of do	First, e-mail a completed copy of this Submission Form and a scanned ocument to DebtCancellationForms@occc.texas.gov . Second, mail the , a copy of this Submission Form, and, if desired, a copy of the deb
Office of Consumer Credit Commission 2601 N. Lamar Blvd. Austin, TX 78705	ier
The submission is not considered complete ur received by our agency.	ntil the nonrefundable filing fee and debt cancellation agreement is
C: Certificate of Compliance: Before sending check all boxes to acknowledge the following	the agreement to the OCCC, carefully review the agreement and ing:
	greement that is intended to be used for motor vehicle retail goods retail installment transactions under Chapter 354 of the
☐ The agreement includes insurance cover	erage as part of the buyer's responsibility to the holder.
☐ The agreement includes all provisions r	required by Section 354.004 of the Texas Finance Code.
☐ The agreement does not contain any ir	nconsistent or misleading provisions.
Any exclusions in the agreement are fu	lly disclosed in plain language.
Approved debt cancellation agreement Finance Code.	s are public information under Section 354.005(f) of the Texas
Signature:	
Your Name:	
Your Title:	