



Telematics Subscription Service Agreement (SSA)

This Is An Electronic Contract.

Date _____

1. PRIMARY SUBSCRIBER INFORMATION

_____	_____	_____
First Name	Middle Initial	Last Name

Company Name (if applicable)		

Address		
_____	_____	_____
Home Phone	Work Phone	Cell Phone

Email address		

2. ADDITIONAL SUBSCRIBER INFORMATION

_____	_____	_____
First Name	Middle Initial	Last Name

Company Name (if applicable)		

Address		
_____	_____	_____
Home Phone	Work Phone	Cell Phone

Email address		

3. VEHICLE INFORMATION (YOUR CAR)

Vehicle Identification Number (VIN) <input type="text"/>												
_____	_____	_____	_____									
Make	Model	Year	Color									

4. EMERGENCY CONTACT INFORMATION

_____	_____	_____
First Name	Middle Initial	Last Name

Relationship		
_____	_____	_____
Home Phone	Work Phone	Cell Phone
_____	_____	_____
First Name	Middle Initial	Last Name

Relationship		
_____	_____	_____
Home Phone	Work Phone	Cell Phone

5. SERVICE PLAN – TERMS OF SERVICE

COMPLIMENTARY SERVICE INCLUDED ON NEW VEHICLES ONLY

Complimentary services begin on the original purchase, or original lease, in-service date of the vehicle. The Telematics Service cost, all taxes and other charges are included during the complimentary service period only.

SUBSCRIPTION FEE REQUIRED FOR YOUR SERVICE PLAN

You have the option to purchase a Service Plan on an annual basis.

New Vehicles:

If you purchase a Service Plan on a new vehicle, you shall be responsible for all Subscription Fees, taxes and other charges payable under this SSA. The Subscription Fee is payable in advance of the renewable term.

Used and Certified Used Vehicles:

If you purchase a Service Plan for a used or certified used vehicle you shall be responsible for all Subscription Fees, taxes and other charges payable under this SSA. The Subscription Fee is payable in advance of the renewable term.

By filing out the following information, you have selected the Service Plan described below, effective upon execution of this SSA.

Service Plan	Start Date	Renewal or End Date
Scheduled Expiration or Renewal Date of your Service Plan is:		

Subtotal:
Tax**:
Total:

**Your sales tax calculation may differ from the actual tax charged to you, depending on tax system availability at time of purchase.

CANCELLATION OF YOUR SERVICE PLAN

Your Service Plan may be cancelled by you or us at anytime, with or without cause, in accordance with the Terms and Conditions which are part of this SSA. **If you cancel your Service Plan we have the right to turn off your Services.** If you cancel your Service Plan, the refund policy described in Section 6 (below) will apply.

6. PAYMENT OPTIONS

Credit or Debit Card

By filling out the information in Section 5 (above), and providing us with your credit or debit card number below, you authorize us to charge your account the Subscription Fee, all taxes and other charges owed for the Service Plan you selected in Section 5 of this SSA. If you do not provide the necessary information and thereby authorize our charging your account, your Service Plan will terminate on its Scheduled Expiration Date.

RENEWAL

You are responsible to pay for your Services by credit or debit card.

Annual Renewal of your Service -You may renew your Service for an additional one-year subscription each year on or before the Scheduled Expiration Date and annually thereafter by calling us at 1-877-855-8377 or 1-800-290-4648. If you purchased a Telematics Services subscription and it is cancelled for any reason, we will prorate the amount owed or to be refunded as of the date of cancellation, without any deductions. Any refund shall be processed immediately by us. If you provide us with your credit or debit card number, we will credit the amount of your refund to your card. If you do not provide your credit or debit card number and paid for a subscription by other means, we will send you a check to the address we have on file for you in the amount to be refunded via U.S. mail.

By clicking here I acknowledge I have read and understood the provisions applicable to the renewal of services.

Your credit or debit card information is maintained in a secure manner. You are responsible for paying directly to others (such as emergency service providers) all charges for services furnished by them that are not expressly covered under your Service Plan.

First Name Middle Initial Last Name

Credit Card Type: American Express Visa MasterCard Discover Diners Club JCB

Credit Card Number:

Expiration Date _____

7. Toyota Entune

You may opt-in to or opt-out of Toyota Entune Communications. The details, including email address, provided may be used to keep you informed about your subscriptions or renewal status and our future products or services. Once you opt-in for the Toyota Entune Communications, you can receive communications related only with your services' subscription or renewal. If you decide to opt-out of Toyota Entune Communications, you express that you do not wish to receive any such information. Please confirm if you would like to opt-in or opt-out of Toyota Entune Communications.

You will receive an email confirming your preference. If you wish to change this preference in the future, please contact our Customer Care Center at 1-877-855-8377.

8. SYSTEM AND CELLULAR CONNECTIVITY NOTICE

Your Service works using a factory installed telematics device which receives Global Positioning System ("GPS") satellite signals and communicates with our response center via commercial mobile wireless communication networks, purchased from one or more third-party providers. **Not all services are available everywhere, particularly in remote or enclosed areas, or on all cars, at all times.**

9. SUBSCRIBER'S SIGNATURE

I have reviewed and read an electronic copy or received and read a paper copy of this SSA and the Terms and Conditions titled "Toyota de Puerto Rico Corp., Terms and Conditions of Your Entune Telematics Service" that are part of this SSA (additional copies available by calling 1-877-855-8377) and I am in agreement and consent to their respective provisions and agree they shall be applicable to me and the services I have agreed to receive. I agree that any agreement, including this SSA or other record provided in connection with the Telematics Service is for all purposes (i) a "writing" and "in writing," and (ii) an "original" either when maintained electronically or printed from electronic records established and maintained in the normal course of business.

I acknowledge that I am of legal age and, if signing on behalf of a corporation or entity, I am fully authorized to sign on its behalf.

I acknowledge that if I provided you with my credit or debit card information I did so by my own choice, and I expressly authorize you to charge my account the Subscription Fee, taxes and any other charges owed under this SSA.

I also acknowledge that I have purchased or leased a vehicle with factory installed telematics service equipment, which includes an electronic locating device and I consent to the use of such device as described in this SSA and the Terms and Conditions.

I agree that by checking this box, it constitutes my signature and agreement to this SSA and its Terms and Conditions and I agree to be bound by this SSA and its Terms and Conditions as though I signed a paper agreement with an ink signature.

I AGREE Signed electronically on _____ Date _____ Time _____