

# INSURANCE CANCELLATION LETTER

Date

Via Certified Mail- Return receipt requested

Name of Insurance Company

Address

Contact details

Re: Cancellation of Policy #

Insured: Insured candidate's name

Policy number:

Policy period: Dear Sir/Madam,

[Since the addresser's details have been mentioned, you can directly start the letter by your demand for cancellation.

Mention the date clearly. Mention the demand to return the unused premiums if any and make a request not to withdraw any future premiums from the account holder's bank.]

[Make a request for written confirmation within a time frame. Provide a contact number for queries. End the letter on a polite note.]

Thanking you,

With regards,

[Signature]

Your name

Address