

# Insurance Termination Letter

[Your Name]

[Your Address]

[City, State, ZIP Code]

[Email Address]

[Phone Number]

[Date]

[Recipient's Name]

[Recipient's Address]

[City, State, ZIP Code]

Subject: Notice of Insurance Policy Termination

Dear [Recipient's Name],

I hope this letter finds you well. I am writing to inform you of my decision to terminate the insurance policy associated with the following details:

Policyholder's Name: [Policyholder's Name]

Policy Number: [Policy Number]

Effective Date of Policy: [Effective Date]

Type of Insurance: [e.g., Auto/Home/Health/Life Insurance]

The reason for terminating the insurance policy is [briefly explain the reason, such as relocation, change in coverage needs, etc.].

Please consider this letter as [number of days, as per policy requirements] days' notice as required by the terms and conditions of the insurance policy. The effective date of the policy termination will be [Termination Date], which allows sufficient time for the policy to remain in effect and ensures a seamless transition.

I kindly request you to process the termination request and provide me with any necessary information regarding the cancellation process, any potential refunds, or any other relevant details.

If there are any cancellation fees or outstanding payments associated with the policy, please inform me at your earliest convenience so that I can settle all outstanding balances.

Please confirm the receipt of this letter and the policy termination request by contacting me at [Your Phone Number] or [Your Email Address].

Thank you for your attention to this matter. I appreciate your prompt assistance in handling this request.

Sincerely,

[Your Name]