

# Life Insurance Policy Cancellation Notice

Date: [Insert Date]

[Your Name]

[Your Address]

[City, State, Zip Code]

[Insurance Company Name]

[Insurance Company Address]

[City, State, Zip Code]

Subject: Request to Cancel Life Insurance Policy

Dear [Insurance Company's Customer Service/Specific Contact Name],

I am writing to request the cancellation of my life insurance policy, effective immediately. My policy number is [Insert Policy Number].

Due to [brief reason if you wish to provide], I have decided to discontinue my life insurance coverage. I kindly ask you to process this cancellation and to confirm the termination of my policy in writing.

Thank you for your assistance in this matter. If you have any questions or need further information, please do not hesitate to contact me at [Your Phone Number] or [Your Email Address].

Sincerely,

[Your Name]