

Life Insurance Policy Termination Request

[Your Name]
[Your Address]
[City, State, ZIP Code]
[Email Address]
[Phone Number]
[Date]

[Insurance Company Name]
[Company Address]
[City, State, ZIP Code]

Dear [Insurance Company Contact/Customer Service],

I am writing to formally request the termination of my life insurance policy with the following details:

Policy Number: [Your Policy Number]
Policyholder Name: [Your Name]

I request that my policy be terminated effective immediately. Please send me a written confirmation of the cancellation. If there are any remaining premiums or any actions required on my part, please inform me at your earliest convenience.

Thank you for your assistance in this matter.

Sincerely,

[Your Signature (if sending a hard copy)]
[Your Printed Name]