

# Letter of Request to Cancel Insurance Coverage

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

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

Dear [Insurance Company Representative's Name],

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

Policy Number: [Your Policy Number]  
Type of Insurance: [Type of Insurance, e.g., Auto, Home, etc.]

Please consider this letter as my official request for cancellation effective immediately / on [desired cancellation date]. I would appreciate it if you could provide me with written confirmation of the cancellation and any details regarding any final payments or refunds.

Thank you for your prompt attention to this matter. If you have any questions or require further information, please do not hesitate to contact me.

Sincerely,

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