

Inquiry About Cancellation Procedures

[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 hope this message finds you well. I am writing to inquire about the cancellation procedures for my motorcycle insurance policy, which is numbered [Your Policy Number]. I am considering terminating my coverage and would like to understand the specific steps involved in this process.

Could you please provide information regarding:

- The notice period required for cancellation
- Any cancellation fees that may apply
- The procedure for returning any documentation
- The timeline for receiving a refund, if applicable

Thank you for your assistance. I look forward to your prompt response.

Sincerely,

[Your Name]