

Service Cancellation Request

Date: [Insert Date]

To,

Customer Service Department

[Insurance Company Name]

[Insurance Company Address]

Dear Sir/Madam,

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

Policy Number: [Insert Policy Number]

Policyholder Name: [Insert Name]

Type of Insurance: [Insert Type]

As per the terms and conditions of my policy, I would like to proceed with the cancellation effective immediately/on [Insert Effective Date].

Please confirm the receipt of this request and the date on which the cancellation will take effect. I would also appreciate details regarding any final premium adjustments or refunds due.

Thank you for your assistance.

Sincerely,

[Your Name]

[Your Address]

[Your Phone Number]

[Your Email Address]