

# Statement of Intent to Cancel Term Life Insurance

**Date:**

**To:**

Customer Service Department  
[Insurance Company Name]  
[Address Line 1]  
[City, State, ZIP]

**Subject: Request for Cancellation of Term Life Insurance Policy**

Dear Sir or Madam,

I am writing to formally request the cancellation of my term life insurance policy with your company.

**Policy Number:** [Insert Policy Number]

**Policyholder Name:** [Insert Your Name]

Please consider this letter as my written statement of intent to cancel the above-mentioned policy effective immediately (or specify a desired cancellation date). Kindly confirm the effective date of cancellation in writing, and inform me if any additional actions or documents are required on my part.

I would appreciate written confirmation of the cancellation for my records.

Thank you for your prompt attention to this matter.

Sincerely,

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