

[Date]

[Policyholder Name]

[Address Line 1]

[City, State, Zip Code]

Subject: Confirmation of Policy Cancellation - [Policy Number]

Dear [Policyholder Name],

This letter is to confirm that your insurance policy [Policy Number] has been officially cancelled, effective [Cancellation Date].

We want to thank you for the time you spent with [Company Name]. We are sorry to see you go, but we respect your decision. Please note that any outstanding claims filed prior to the cancellation date will continue to be processed according to your policy terms.

### **Request for Feedback**

To help us improve our services, we would greatly appreciate it if you could complete a brief exit survey. Your feedback is vital in helping us understand how we can better serve our clients in the future.

You can access the survey by clicking the link below or copying it into your browser:

[\[Link: Policyholder Exit Survey\]](#)

The survey will take less than five minutes to complete and is completely anonymous.

If you have any questions regarding your final statement or if you decide you would like to return to us in the future, please do not hesitate to contact our customer service team at [Phone Number] or [Email Address].

We wish you all the best.

Sincerely,

[Your Name/Department Name]

[Company Name]