

[Your Name]  
[Your Address]  
[Your Phone Number]  
[Your Email]

[Date]

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

**RE: Notice of Cancellation of Insurance Policy**

Policy Number: [Your Policy Number]  
Property Address: [Address of the Insured Property]

Dear [Insurance Company/Agent Name],

I am writing to formally request the immediate cancellation of the insurance policy mentioned above, effective as of [Cancellation Date].

This request is being made because the property has been unoccupied for a period exceeding [Number of Days] days. I understand that this change in occupancy status was not previously disclosed or covered under the existing terms of the policy, rendering the current coverage void or unsuitable for the property's current risk profile.

Please provide a written confirmation of this cancellation and a statement regarding any pro-rata refund of premiums paid for the remaining term of the policy. If there are any outstanding balances or specific forms required to finalize this request, please notify me immediately.

Thank you for your prompt attention to this matter.

Sincerely,

[Your Signature]

[Your Printed Name]