

[Your Name]
[Your Address]
[Your City, State, Zip Code]
[Your Phone Number]
[Your Email]

[Date]

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

RE: Request for Refund of Unearned Premium

Policy Number: [Your Policy Number]
Effective Date of Cancellation: [Date Cancellation Occurred]

To Whom It May Concern,

I am writing to formally request a refund of the unearned premium for the homeowners insurance policy referenced above. This policy was cancelled effective [Date].

As I have paid the premium in full for the current term, I am entitled to a pro-rata refund for the unused portion of the policy following the cancellation date. Please process this refund immediately.

Please mail the check to the following address:

[Your Mailing Address]
[City, State, Zip Code]

I look forward to receiving the refund within [Number, e.g., 14] business days. If there are any issues regarding this request, please contact me at the phone number or email address provided above.

Sincerely,

[Your Signature]

[Your Printed Name]