

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

[Date]

[Insurance Company Name]  
[Insurance Agent Name, if applicable]  
[Insurance Company Address]  
[City, State, Zip Code]

**RE: Request to Remove Driver from Policy Number: [Your Policy Number]**

To Whom It May Concern,

I am writing to formally request the removal of [Name of Driver to be Removed] from my auto insurance policy, effective as of [Date].

This request is being made due to our [divorce / legal separation]. [Name of Driver to be Removed] no longer resides at my address and will no longer have access to the vehicles listed on this policy.

Please find attached the following supporting documentation as required:

- [e.g., A copy of the Divorce Decree or Separation Agreement]
- [e.g., Proof of new insurance for the removed driver]
- [e.g., Proof of the removed driver's new residency]

Please update my policy records and adjust my premiums accordingly. I would appreciate a written confirmation of this change and an updated declarations page reflecting the removal.

If you require any further information or additional forms to be completed, please contact me at your earliest convenience.

Sincerely,

[Your Signature]

[Your Printed Name]