

[Your Name/Business Name]

[Your Address]

[City, State, Zip Code]

[Phone Number]

[Email Address]

[Date]

[Insurance Company Name]

[Agent Name, if applicable]

[Insurance Company Address]

[City, State, Zip Code]

RE: Cancellation of Cyber Liability Endorsement

Dear [Agent Name or Customer Service Department],

Please accept this letter as a formal request to cancel the Cyber Liability Endorsement currently attached to my insurance policy. The details of the policy are as follows:

- **Policy Number:** [Your Policy Number]
- **Effective Date of Cancellation:** [Date you want coverage to end]

I am requesting the removal of this specific endorsement only. Please ensure that the primary coverages under the main policy remain in full force and effect.

Please send a written confirmation of this cancellation and provide an updated premium statement reflecting any applicable credits or refunds due to the removal of this coverage.

Thank you for your prompt attention to this matter.

Sincerely,

[Your Signature]

[Your Printed Name]

[Your Title, if for a business]