[Date]

[Lender Name]
[Lender Address]
[City, State, Zip Code]

RE: Notice of Insurance Policy Termination

To Whom It May Concern,

This letter is to formally notify you that the insurance policy listed below has been terminated.

Policyholder Name: [Your Full Name]
Policy Number: [Policy Number]
Property/Collateral Address: [Address of Insured Property]
Termination Effective Date: [Date Coverage Ended]

As the listed mortgagee/lienholder, please update your records to reflect that coverage under this specific policy is no longer active. [Optional: If you have replaced this policy, add: "New coverage has been established with (New Company Name) under policy number (New Policy Number)."]

If you require any further documentation or have questions regarding this cancellation, please contact me at [Your Phone Number] or [Your Email Address].

Sincerely,

[Your Signature]
[Your Printed Name]