

Sills Insurance Agency

Plano, Texas

Insurance Policy Cancellation

Insurance Company: _____

Today's Date: _____

Name of Insured: _____

Policy Number(s): _____

Cancellation date: _____ at 12:01 a.m.

To Sills Insurance Agency:

Please cancel the insurance policy or policies as indicated above on the date specified.

I understand that you may contact me for verification of my cancellation request.

Sincerely,

Signature: _____

Print name: _____

Please mail, fax, or email this form to:

Sills Insurance Agency
2817 Regal Rd Ste 101
Plano, Texas 75075

Fax: 972-596-0618

Email: jean@sillsinsuranceagency.com