**[Your Name Here]  
[Your Address Here]**

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**ALLIANZ ARENA, GROUND FLOOR,  
BLOCK 2A, PLAZA SENTRAL,  
JALAN STESEN SENTRAL 5,  
KUALA LUMPUR SENTRAL,  
50470 KUALA LUMPUR. DATE: DD MONTH YY**

Dear SIR/MADAM,

**APPLICATION FOR CANCELLATION OF INSURANCE POLICY**

I am writing this letter to inform that I want to cancel my insurance policy. I have contacted your representative at the telephone number 1-300-22-5542 and I was asked to write a letter stating that I would like to apply to cancel the insurance policy that I have signed up. My policy started [policy start date].

2. Enclosed are my personal information and details.

Name:   
 Identification Card Number:  
 Telephone Number: Policy Number:  
 Bank Account Number:

3. Your full cooperation in this matter is highly appreciated.

Thank you.

Sincerely,

[Your Name Here]