

Moore-Terihay Agency Inc.

Brandon, Florida

Insurance Policy Cancellation

Insurance Company: _____

Today's Date: _____

Name of Insured: _____

Policy Number(s): _____

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

To Moore-Terihay Agency Inc.:

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:

Moore-Terihay Agency Inc.
1315 Providence Road
Brandon, FL 33511

Fax: 813-661-2935

Email: service@mtiagency.com