TINGLER LLC
Insurance
804-448-2402

Cancellation Method Elective

Policy type (circle): HOME/DWELLING AUTO Other (define): _____

Company to cancel: _____

Policy number(s) to cancel: _____

Contact info for cancel (phone, fax, etc. (specify)): _____

The following cancellation method is selected (select one):

☐ I, the insured, will complete the cancellation of my former policy (ies).

☐ Tingler Insurance will complete the cancellation of my former policy (ies).

Signature _____ Printed name _____

Date _____

Signature _____ Printed name _____

Date _____