Barry Greenberg Insurance Agency

Westlake Village, California

Insurance Policy Cancellation

Insurance Company: _____ Today's Date: _____

Name of Insured: _____

Policy Number(s): _____

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

To Barry Greenberg 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:

Barry Greenberg Insurance Agency
650 S Westlake Blvd #203
Westlake Village, CA 91362

Fax: 805-494-1112

Email: customerservice@barryg.com