

Insurance Cancellation.

C&L A/c No

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To Whom It May Concern,

I/we request in writing that ALL insurance policies relating to my/our indebtedness with yourselves be cancelled immediately and any premiums be refunded.

Thank you for your help and co-operation in this matter.

First Name _____ Second Name _____

Signed **X** _____ Dated _____

AND

First Name _____ Second Name _____

Signed **X** _____ Dated _____

OF

Address _____

Tel :- 0870 141 7119 Fax:- 0870 626 0723 e-mail:- at accounts@creditandloan.co.uk