The Heritage Agency Inc

Insurance Policy Cancellation

Phenix City, Alabama

Email:

Insurance Company:	Today's Date:
Name of Insured:	
Policy Number(s):	
Cancellation date: at 12:01 a.m.	
To The Heritage Agency Inc:	
Please cancel the insurance policy or policies as indica	ted above on the date specified.
I understand that you may contact me for verification o	of my cancellation request.
Sincerely,	
Signature:	
Print name:	
Please mail, fax, or email this form to:	
The Heritage Agency Inc	
1610 Broad Street Phenix City, AL 36867	
Fax: 334-298-5589	