

**Robert J. Bertram & Sons Insurance Agency, Inc.**

Wilkes Barre, Pennsylvania

**Insurance Policy Cancellation**

Insurance Company: \_\_\_\_\_

Today's Date: \_\_\_\_\_

Name of Insured: \_\_\_\_\_

Policy Number(s): \_\_\_\_\_

Cancellation date: \_\_\_\_\_ at 12:01 a.m.

To Robert J. Bertram & Sons Insurance 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:

Robert J. Bertram & Sons Insurance Agency, Inc.

45 Westminster St

Wilkes Barre, PA 18702

Fax: 570-824-9950

Email: [insure@epix.net](mailto:insure@epix.net)