

Insurance Policy Cancellation Checklist

Initiation & Request

Tasks related to receiving and documenting the cancellation request.

Enter date	
Reason for Cancellation (Customer Provide	d)
Write something	
Cancellation Method	
Online	
Phone	
Mail	
☐ In-Person	
Requestor Name (if not customer)	
Troquestor riame in not oustomer)	

Enter a number				
Requestor Signature	(if applicable)			
olicy Verifica	ation			
_		n and verifying p	oolicy details.	
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suring the policy is eliq		n and verifying p	oolicy details.	
Suring the policy is eligonal policy Number		n and verifying p	oolicy details.	
Policy Number Enter a number	gible for cancellatio	n and verifying p	oolicy details.	
Policy Number Enter a number	gible for cancellatio	n and verifying p	oolicy details.	
Policy Number Enter a number Policy Status (Active	gible for cancellatio	n and verifying p	oolicy details.	
Policy Number Enter a number Policy Status (Active	gible for cancellatio	n and verifying p	oolicy details.	
Policy Status (Active	Jible for cancellatio	n and verifying p	oolicy details.	

Auto	
Homeowners	
Life	
Commercial	
Insured's Name	
Write something	
Coverage Amount	
Enter a number	
dentifying and addressing any outstanding premiums, claims, or loans associated w olicy.	ith the
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olicy.	rith the
Outstanding Premium Balance	rith the
Outstanding Premium Balance Enter a number	rith the
Outstanding Premium Balance Enter a number Outstanding Loan Balance (if applicable)	rith the
Outstanding Premium Balance Enter a number Outstanding Loan Balance (if applicable) Enter a number	rith the

Write something	
write something	
Policyholder Loan Status	
Active	
Paid Off	
Defaulted	
Claim Payment Due Date (if applicable)	
Enter date	
Enter nate	
efund Calculation & Processing	
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efund Calculation & Processing ermining the refund amount and initiating the refund process. Premium Paid to Date Enter a number Cancellation Fee (if applicable)	
efund Calculation & Processing termining the refund amount and initiating the refund process. Premium Paid to Date Enter a number	
efund Calculation & Processing termining the refund amount and initiating the refund process. Premium Paid to Date Enter a number Cancellation Fee (if applicable)	

Refund Amount	
Enter a number	
Refund Method	
Check	
☐ Electronic Funds Transfer (EFT) ☐ Credit Card	
Bank Account Details (if EFT)	
Write something	
Notes/Comments Regarding Refund	
Write something	
Scheduled Refund Date	
Enter date	
ancellation Documentation & Notification	
eparing the necessary cancellation documents and notifying all relevant parties.	

Cancellation Reason (Customer)

Write something...

Cancellation Method Written Notice Email Phone Call
Date of Cancellation Notice Sent Enter date
Time of Cancellation Notice Sent (if applicable)
Copy of Cancellation Notice (if applicable) ① Upload File
Notes on Communication with Customer Write something
Recipient of Cancellation Confirmation Customer Agent Underwriter

System Updates & Record Keeping

Updating the insurance system and maintaining accurate records of the cancellation.

Cancellation Record ID
Enter a number
Cancellation Processing Date
Enter date
Notes on Cancellation Process
Write something
Cancellation Status
☐ Pending ☐ Presessing
□ Processing□ Completed
☐ Error
User ID - Processed By
Write something
Final Archive Date
Enter date