

REQUEST FOR TERMINATION

(For policies without CSV (Medical/HIP/Term))

I, the undersigned, am requesting Colina Imperial Insurance Ltd. to terminate

POLICY # _____ in the name of _____

Owner _____ Date _____

P.O. Box _____ Email Address: _____

Tel. (H) _____ Tel. (W) _____

I authorize COLINA Imperial to pay any unearned premiums or refunds due to me, the rightful owner of this policy, less any claims the Company may have and hereby release Colina Imperial Insurance Ltd. of any further claims against this policy. I further understand that there are no further Insurance proceeds payable and all benefits will cease under the policy as a result of this termination.

1. Cheque to be made payable to (if applicable) _____

2. Is Contract attached? If no, sign Declaration below Yes No

3. Has any assignment been released? Yes No

DECLARATION OF LOST POLICY

I HEREBY CERTIFY that the above document has been lost, mislaid or destroyed beyond hope of recovery due to _____ Sign: _____

I also release Colina Imperial Insurance Ltd., from all claims, suits or actions on account of the lost Policy and from any and all damages, posts, charges and expenses arising therefrom. It is also agreed that if the said Policy is found it will be returned to the Company.

Cheque to be made payable to (if applicable) _____

Dated at _____ this _____ day of _____

Owner's Signature: _____ Witness: _____

Beneficiary/Trustee: _____ Witness: _____

Beneficiary/Trustee: _____ Witness: _____

Assignee: _____ Witness: _____

SURVEY

1. Did you consult with your Sales Representative before making this decision? Yes No

2. Are you replacing this policy with: Another ColinaImperial Policy? Yes No

Another Company's Policy? Yes No

3. If answer to #2 is no, do you have other adequate insurance coverage? Yes No

4. If answer to #3 is no, would you like a sales representative to contact you with other Insurance options? Yes No

5. Were you happy with the services provided by: Your Sales Representative: Yes No

Administrative Personnel: Yes No

6. Why are you terminating this policy? _____

7. Do you have any suggestions that might help us improve services to our clients?

