

## CANCELLATION FORM FOR MOTOR INSURANCE POLICY

**CAR INSURANCE POLICY NO** : \_\_\_\_\_  
**VEHICLE NO** : \_\_\_\_\_

**Date of Cancellation** : \_\_\_\_\_

++ Cancellation of Policy will only take effect upon receipt of the original Certificate of Insurance  
OR Declaration of Loss Form.

**Reason for Cancellation :**

- Car was sold  
 Wrong cover period  
 Service experience with Aviva: (Please help us to improve by elaborating on your dissatisfaction) \_\_\_\_\_  
 Others: (Please let us know why we are losing you) \_\_\_\_\_

Please note that all refunds, if any, will be credited back to the original payee through the original payment mode within 14 working days of receiving the cancellation form. If you are not the original payee, please contact our Customer Service at 6827 9966 or email [personal\\_insurance@aviva.com.sg](mailto:personal_insurance@aviva.com.sg)

**DECLARATION**

I declare that I have not amended, transferred or traded the Certificate to any third party or used it in any formal capacity as proof of cover or value.

I recognize that the original Certificate of Insurance remains the property of Aviva Ltd. and following cancellation or replacement, it will have no value and that it cannot be used as proof of cover.

\_\_\_\_\_  
Name Of Policyholder

\_\_\_\_\_  
Signature Of Policyholder

\_\_\_\_\_  
NRIC / FIN Number

\_\_\_\_\_  
Date

For official use only	
SR / PR / NR / FR Credit Card / Cheque	Staff name: Date :
Remarks:	