

Mr Richard Liang  
Senior Manager  
Medical Insurance Department  
The Pacific Insurance Berhad  
Level 6 Menara Prudential  
10 Jalan Sultan Ismail, P.O. Box 12490  
50780 Kuala Lumpur

Dear Mr Richard Liang

**RE: CONFIRMATION ON CANCELLATION OF THE PRECEDING POLICY**

I hereby confirm that I will cancel my preceding policy(ies) mentioned below after I have received the approval for my take-over application(s) with The Pacific Insurance Berhad dated \_\_\_\_\_ (application date).

Policyholder Name : \_\_\_\_\_

Insurance Company Name(s) : \_\_\_\_\_

\_\_\_\_\_

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

\_\_\_\_\_

\_\_\_\_\_

Insured Person Name(s) : \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Kindly review my take-over application as soon as possible.

Thank you.

Your faithfully

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

Name of Proposer : \_\_\_\_\_

Identity Card Number : \_\_\_\_\_