***Important note:***

*Please note that this letter should be personalised depending on your situation, namely the fields highlighted in yellow. Don’t forget to delete our comments in* ***grey*** *and this note.*

Mr/Ms

Your name

Your address

**Registered letter**

Insurance

Name of insurance

Place, date

**Cancellation of insurance due to breach of information obligation**

Dear Sir/Madam

On DD/MM/YYYY I signed an application for the following insurance policy(/policies):

*(Specify all insurance policies you would like to cancel here)*

* Name of the insurance/additional cover
* Name of the insurance/additional cover

I was never informed of my right of cancellation under Article 3 paragraph 1 letter h of the Swiss Insurance Contract Act (VVG, SR 221.229.1), neither of the form nor the time limit. Pursuant to Article 3a VVG, the period has not yet commenced due to my lack of knowledge.

I am therefore asserting my right of cancellation under Article 2a VVG. Please confirm receipt of this notice in writing.

Yours sincerely
Name and signature