



ING Lion Assistance Insurance

Request to cancel or terminate the policy

Branch number: _____
Contact: _____
Telephone: _____

Policy number: 72_ - _____ - ____
Date: ____ / ____ / ____
ING Account: ____ - _____ - ____

1. Personal details of the policyholder

Surname: _____ First name: _____

2. Cancellation within 14 days

0 I hereby exercise my right to cancel my ING Lion Assistance insurance policy **within 14 days of the date on which it was concluded.**

I understand that the policy will be terminated immediately on receipt by Inter Partner Assistance of this request and that any unused part of the premium will be repaid.

3. Remarks

- I do not have an ING account, so I would like all premium repayments to be made to my account:

IBAN: _____ BIC: _____

- Other remarks: _____

The request to terminate the policy will only come into effect at the earliest on the date on which it is received at the following address:

ING Lion Assistance – Response number 3 – DA 852-156-3 – 1040 Brussels

The termination will be confirmed by letter.

4. Compulsory signature of the policyholder: