

Insurance Reference Check Request

Date: [Insert Date]

[Recipient's Name]

[Recipient's Title]

[Company Name]

[Company Address]

[City, State, Zip Code]

Dear [Recipient's Name],

We are currently in the process of reviewing [Client's Name] for their insurance application and would appreciate your assistance in providing a reference check regarding their insurance history.

Specifically, we would like to obtain information regarding their policy duration, claims history, and any other relevant details that may assist us in our evaluation.

Your feedback is crucial in helping us ensure that we provide the best service and coverage for [Client's Name].

Please feel free to contact me at [Your Phone Number] or [Your Email Address] if you have any questions or require further information.

Thank you for your time and assistance.

Sincerely,

[Your Name]

[Your Title]

[Your Company Name]

[Your Company Address]

[City, State, Zip Code]