

Request for Duplicate Insurance Policy

[Your Name]

[Your Address]

[City, State, ZIP Code]

[Email Address]

[Phone Number]

[Date]

[Insurance Company Name]

[Insurance Company Address]

[City, State, ZIP Code]

Dear [Insurance Agent/Customer Service],

I hope this message finds you well. I am writing to formally request a duplicate copy of my insurance policy for [Type of Insurance, e.g., Auto, Homeowners, etc.]. My policy number is [Policy Number].

Unfortunately, I have misplaced my original copy and would appreciate your assistance in obtaining a duplicate. Please let me know if there are any forms I need to fill out or fees that apply.

Thank you for your prompt attention to this matter. I look forward to your reply.

Sincerely,

[Your Name]