

# **Demand Letter for Revising Insured Amount**

[Your Name]  
[Your Address]  
[City, State, Zip Code]  
[Email Address]  
[Phone Number]  
[Date]

[Insurance Company Name]  
[Insurance Company Address]  
[City, State, Zip Code]

Subject: Demand for Revising Insured Amount

Dear [Insurance Company's Contact Person's Name],

I am writing to formally request a revision of the insured amount under policy number [Your Policy Number]. Upon reviewing my current coverage and considering recent changes in my circumstances, I believe that the initial insured amount is no longer adequate to meet my needs.

Specifically, [briefly explain reasons for the request, e.g., increase in property value, changes in income, new dependents, etc.]. I kindly ask that you consider adjusting my policy to reflect a more suitable insured amount of [Proposed Insured Amount].

Please let me know the necessary steps to initiate this revision process. I look forward to your prompt response to this matter.

Thank you for your attention to this request.

Sincerely,

[Your Signature (if sending a hard copy)]  
[Your Printed Name]