

Request for Reactivation of Insurance Policy

[Your Name]

[Your Address]

[City, State, Zip Code]

[Your Email Address]

[Your Phone Number]

[Date]

[Insurance Company Name]

[Insurance Company Address]

[City, State, Zip Code]

Dear [Insurance Company Name],

I hope this message finds you well. I am writing to formally request the reactivation of my insurance policy with the policy number [Your Policy Number]. Due to [reason for lapse, e.g., financial difficulties, oversight], I was unable to maintain my payments on time.

Having realized the importance of maintaining my coverage, I would like to request that you kindly consider reactivating my policy. I am prepared to settle any outstanding amounts and comply with the necessary requirements to reinstate my coverage.

Please let me know the steps I need to take to proceed with this request. I appreciate your assistance in this matter and look forward to your prompt response.

Thank you for your attention to this matter.

Sincerely,

[Your Name]