

Request for Extension of Policy Grace Period

To,
The Manager,
[Insurance Company Name],
[Company Address],
[City, State, Zip Code]

Date: [DD/MM/YYYY]

Subject: Request for Extension of Policy Grace Period

Dear [Manager's Name],

I hope this letter finds you in good health and spirits. I am writing to formally request an extension of the grace period for my insurance policy, policy number [Your Policy Number].

Due to [brief explanation of your circumstances, e.g., financial difficulties, unexpected events], I am unable to meet the payment deadline. I kindly ask for an extension of [specific time period] to allow me to settle my dues without disrupting my coverage.

I appreciate your understanding and assistance regarding this matter. I look forward to your favorable response.

Thank you for your attention.

Sincerely,
[Your Name]
[Your Address]
[City, State, Zip Code]
[Your Contact Number]
[Your Email Address]