

Notification of Death

Date: [Insert Date]

To,

[Insurance Company Name]

[Insurance Company Address]

[City, State, Zip Code]

Dear [Insurance Claims Department/Specific Contact Name],

I am writing to formally notify you of the passing of [Insured's Full Name], who held a policy with your company, [Policy Number]. The date of death was [Date of Death].

As the [Relationship to the Insured], I would like to request information regarding the claims process and any necessary documentation required to proceed with the claim. Enclosed are the copies of the death certificate and the insurance policy for your reference.

Please let me know how I can facilitate this process. You can reach me at [Your Phone Number] or [Your Email Address].

Thank you for your prompt attention to this matter.

Sincerely,

[Your Full Name]

[Your Address]

[City, State, Zip Code]