

Policyholder Identification Verification Request

Date: [Insert Date]

To: [Insurance Company Name]

Address: [Insurance Company Address]

Dear [Insurance Representative's Name],

I hope this message finds you well. I am writing to formally request identification verification for my insurance policy.

Policyholder Name: [Your Name]

Policy Number: [Your Policy Number]

Date of Birth: [Your Date of Birth]

In order to facilitate the verification process, I have attached the required documents, which include:

- Copy of Government-Issued ID
- Proof of Address (e.g., utility bill)

Your assistance in verifying my identity and ensuring the security of my policy is greatly appreciated. Should you require any additional information or documentation, please do not hesitate to contact me at [Your Phone Number] or [Your Email Address].

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

Sincerely,
[Your Name]