

# Policyholder Verification Documentation Submission

Date: [Insert Date]

To Whom It May Concern,

I am writing to submit the required documentation for the verification of my policyholder status with [Insurance Company Name]. Below are the details of my policy:

**Policyholder Name:** [Your Name]

**Policy Number:** [Your Policy Number]

**Contact Information:** [Your Phone Number, Email Address]

## Attached Documents:

- Proof of Identity (e.g., Driver's License, Passport)
- Proof of Address (e.g., Utility Bill, Bank Statement)
- Policy Document

Please let me know if any additional information or documentation is required. I appreciate your assistance in this matter.

Thank you for your attention.

Sincerely,

[Your Name]

[Your Signature (if sending a hard copy)]