

Request for Automatic Premium Payment Setup

Date: [Insert Date]

[Your Name]

[Your Address]

[City, State, Zip Code]

[Email Address]

[Phone Number]

[Insurance Company Name]

[Insurance Company Address]

[City, State, Zip Code]

Dear [Client Services/Specific Contact Name],

I am writing to request the setup of automatic premium payments for my insurance policy, policy number [Your Policy Number]. I would like to ensure that my payments are made promptly to avoid any lapse in coverage.

Please find my banking details outlined below for this setup:

- Account Name: [Your Account Name]
- Bank Name: [Your Bank Name]
- Account Number: [Your Account Number]
- Routing Number: [Your Routing Number]

Should you need any further information or documentation, please do not hesitate to contact me at [Your Phone Number] or [Your Email Address]. Thank you for your assistance in this matter.

Sincerely,

[Your Name]