

Life Insurance Maturity Payout Request

Policyholder Name: [Your Name]

Policy Number: [Your Policy Number]

Date: [Current Date]

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

Subject: Request for Maturity Payout for Policy Number [Your Policy Number]

Dear Sir/Madam,

I am writing to formally request the maturity payout for my life insurance policy with the number [Your Policy Number], which has matured on [Maturity Date].

As per the terms and conditions of my policy, I have enclosed the necessary documents required for processing my request, including:

- Original Policy Document
- Proof of Identity
- Bank Account Details for Fund Transfer

I would appreciate your prompt attention to this matter and kindly request that the maturity payout be processed at your earliest convenience. Should you require any further information or documents, please feel free to contact me at [Your Phone Number] or [Your Email Address].

Thank you for your assistance.

Sincerely,

[Your Signature (if sending a hard copy)]
[Your Name]
[Your Address]
[City, State, Zip Code]