

Duplicate Policy Request for Lost Items

[Your Name]

[Your Address]

[City, State, ZIP Code]

[Email Address]

[Phone Number]

[Date]

[Insurance Company Name]

[Company Address]

[City, State, ZIP Code]

Dear [Insurance Company Contact/Customer Service],

I am writing to request a duplicate copy of my insurance policy for lost items associated with my account, policy number [Your Policy Number]. Unfortunately, I have misplaced the original document and require a new copy for my records.

Details of the lost items include:

- Item 1: [Description]
- Item 2: [Description]
- Item 3: [Description]

Please let me know if there are any forms or fees required for this request. I appreciate your prompt attention to this matter.

Thank you for your assistance.

Sincerely,

[Your Name]