

Transfer of Mechanical Breakdown Insurance Coverage

Date: [Insert Date]

[Your Name]

[Your Address]

[City, State, Zip Code]

[Your Email]

[Your Phone Number]

[Insurance Company Name]

[Insurance Company Address]

[City, State, Zip Code]

Subject: Transfer of Mechanical Breakdown Insurance Coverage

Dear [Insurance Company Contact Name],

I am writing to request the transfer of my mechanical breakdown insurance coverage from my current vehicle to a new vehicle due to [reason for transfer, e.g., selling the old vehicle, purchasing a new vehicle].

Details of my current coverage are as follows:

- Policy Number: [Your Policy Number]
- Current Vehicle: [Make, Model, Year, VIN of the current vehicle]
- New Vehicle: [Make, Model, Year, VIN of the new vehicle]

Please let me know if you require any additional information or documentation to facilitate this transfer. I appreciate your prompt attention to this matter and look forward to your confirmation.

Thank you for your assistance.

Sincerely,

[Your Name]