

Request for Temporary Insurance Extension

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 [Insurance Company Representative's Name],

I am writing to formally request a temporary extension of my insurance policy (Policy Number: [Your Policy Number]). Due to [reason for extension request], I find myself in need of additional coverage beyond the current expiration date.

To assist in processing my request, I am including the following documentation:

- Copy of my current insurance policy
- Proof of [importance of documentation, e.g., financial hardship, upcoming events]
- Any relevant correspondence regarding my account

Thank you for considering my request. I appreciate your assistance and look forward to your prompt response.

Sincerely,

[Your Name]