

Request for Temporary Insurance Extension

Date: [Insert Date]

[Recipient's Name]

[Recipient's Title]

[Insurance Company Name]

[Insurance Company Address]

[City, State, Zip Code]

Dear [Recipient's Name],

I hope this message finds you well. I am writing to formally request a temporary extension of my personal insurance coverage due to [briefly explain reason, e.g., an unforeseen circumstance]. My policy number is [Your Policy Number].

The current expiration date of my policy is [Expiration Date], and I would greatly appreciate if you could extend my coverage for an additional [number of days/weeks, etc.]. This extension will ensure that I remain protected during this time of [reason for extension].

Please let me know if you require any further information or documents to process my request. I appreciate your consideration and look forward to your prompt response.

Thank you for your assistance.

Sincerely,

[Your Name]

[Your Address]

[City, State, Zip Code]

[Your Phone Number]

[Your Email Address]