

Life Insurance Policy Maturity Settlement Instructions

Date: [Insert Date]

To,

[Policyholder's Name]

[Policyholder's Address]

[City, State, Zip Code]

Dear [Policyholder's Name],

We are pleased to inform you that your life insurance policy bearing the number [Policy Number] has matured as of [Maturity Date]. To facilitate a smooth and timely settlement, please follow the instructions outlined below:

Settlement Instructions:

1. Please complete the enclosed claim form.
2. Submit any required documents including your identification proof and policy documents.
3. Indicate your preferred mode of payment (Bank Transfer/Cheque). If you prefer a bank transfer, please provide your bank details (Account Number, IFSC Code, etc.).
4. Send the completed documents to our office at [Company Address] or email them to [Company Email].

For your convenience, kindly ensure that all documents are submitted by [Submission Deadline]. This will help us process your settlement efficiently.

If you have any questions or require further assistance, do not hesitate to contact us at [Company Phone Number] or [Company Email].

Thank you for choosing [Insurance Company Name]. We wish you all the best in your future endeavors.

Sincerely,

[Your Name]

[Your Position]

[Insurance Company Name]

[Company Address]

[Company Phone Number]