

Request for Extended Policy Coverage

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 hope this letter finds you well. I am writing to formally request an extension of coverage under my existing insurance policy with policy number [Insert Policy Number]. Due to [provide brief reason for the request, e.g., changes in circumstances, extended travel plans, etc.], I believe that extending my coverage will provide me with the necessary protection.

I would greatly appreciate it if you could provide me with information regarding the process to extend my policy, including any additional costs or conditions that may apply. Please let me know if you require any further documentation or information from my side to facilitate this request.

Thank you for your attention to this matter. I look forward to your prompt response.

Sincerely,

[Your Name]