

Insurance Bonus Declaration for Premium Refunds

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]

Subject: Declaration for Insurance Bonus and Request for Premium Refund

Dear [Insurance Company Name],

I am writing to formally declare my eligibility for the insurance bonus associated with my policy number [Insert Policy Number]. According to the terms of my insurance contract, I am entitled to a premium refund as a result of the bonus declaration.

Details of my policy are as follows:

- Policyholder Name: [Your Name]
- Policy Number: [Insert Policy Number]
- Coverage Start Date: [Insert Start Date]
- Coverage End Date: [Insert End Date]

In accordance with the policy guidelines, I kindly request the processing of my premium refund at your earliest convenience. Please let me know if you require any additional information or documentation to facilitate this request.

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

Sincerely,

[Your Name]