

Request for Renewal of Health Insurance Policy

To,

Insurance Company Name
Address Line 1
Address Line 2
City, State, Zip Code

Date: [Insert Date]

Subject: Renewal Request for Health Insurance Policy

Dear [Insurance Manager's Name],

I hope this letter finds you well. I am writing to formally request the renewal of my health insurance policy, Policy Number: [Insert Policy Number], which is set to expire on [Insert Expiration Date].

Over the past year, I have appreciated the coverage and service provided under this policy. I would like to continue my coverage without any interruptions.

Please let me know the necessary steps needed to complete the renewal process. If there are any changes to the terms or premium amounts, I would appreciate a detailed explanation.

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

Sincerely,

[Your Name]
[Your Address Line 1]
[Your Address Line 2]
[City, State, Zip Code]
[Your Phone Number]
[Your Email Address]