

Inquiry Regarding Group Insurance Eligibility

Date: [Insert Date]

[Your Name]

[Your Address]

[City, State, Zip Code]

[Your Email Address]

[Your Phone Number]

[Recipient's Name]

[Company/Organization Name]

[Company Address]

[City, State, Zip Code]

Dear [Recipient's Name],

I hope this message finds you well. I am writing to inquire about the eligibility criteria for the group insurance plan offered by [Company/Organization Name]. As a [your position or relation to the company, if applicable], I would like to understand the specific requirements and application process involved.

Could you please provide information regarding:

- The eligibility criteria for employees/members
- The types of coverage available within the group insurance
- Any necessary documentation required for enrollment
- Deadlines for application or enrollment

Thank you for your assistance. I look forward to your prompt response, as this will help me assess my options accordingly.

Sincerely,

[Your Name]