## **Policyholder Name**

Policy Number: 123456789

Date: [Insert Date]

## **Insurance Company Name**

Address Line 1

Address Line 2

City, State, Zip Code

## Subject: Clarification of Collision Coverage Conditions

Dear [Insurance Company Representative],

I hope this message finds you well. I am writing to seek clarification regarding the collision coverage conditions outlined in my auto insurance policy.

Specifically, I would like to understand the following points:

- The deductible amounts associated with collision claims.
- Exclusions that may apply to collision coverage.
- The process for filing a collision claim.
- Any limitations on coverage for rental vehicles after a collision.

Thank you for your attention to this matter. I look forward to your prompt response to help ensure I fully understand my coverage.

Sincerely,

[Your Name]

[Your Address]

[Your City, State, Zip]

[Your Phone Number]

[Your Email Address]